

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Bonamici for Congress

ADDRESS (number and street)

3321 SE 20th Ave

Check if different
than previously
reported. (ACC)

Portland

OR

97202

2. FEC IDENTIFICATION NUMBER ▼

C

C00500421

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

OR

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y

01 / 01 / 2014

through

M M / D D / Y Y Y Y

03 / 31 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Kevin Neely

Signature of Treasurer

Kevin Neely

[Electronically Filed]

Date

M M / D D / Y Y Y Y

04 / 14 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Bonamici for Congress

Report Covering the Period:

From:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 | | 0 | 1 | | 2 | 0 | 1 | 4 |

To:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 3 | 1 | | 2 | 0 | 1 | 4 |

| | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)).... | 125839.79 | 583410.14 |
| (b) Total Contribution Refunds (from Line 20(d)) | 1.73 | 1.73 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) | 125838.06 | 583408.41 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 46711.17 | 283744.49 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 0.00 | 0.00 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) | 46711.17 | 283744.49 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 465229.67 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 200000.00 | |

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

Bonamici for Congress

Report Covering the Period:

From:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 | | 0 | 1 | | 2 | 0 | 1 | 4 |

To:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 3 | 1 | | 2 | 0 | 1 | 4 |

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

54397.00

220472.00

(ii) Unitemized.....

6942.79

35829.39

(iii) TOTAL of contributions from individuals ▶

61339.79

256301.39

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

64500.00

326971.25

(d) The Candidate.....

0.00

137.50

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

125839.79

583410.14

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

8602.69

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

125839.79

592012.83

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 87

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 46711.17 | 283744.49 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 28750.00 | 58000.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) Of All Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0.00 | 0.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | 1.73 | 1.73 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | 1.73 | 1.73 |
| 21. OTHER DISBURSEMENTS | 1125.00 | 35180.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 76587.90 | 376926.22 |

III. CASH SUMMARY

| | |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 415977.78 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 125839.79 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 541817.57 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 76587.90 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 465229.67 |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 5 OF 87

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Bonamici for Congress**A.** Full Name (Last, First, Middle Initial)
Confederated Tribes of Siletz Indians

Mailing Address PO Box 549

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Siletz | OR | 97380- |

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 21 | | 2014 |

Transaction ID : CN022314104823Co

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
Ball Janik LLP

Mailing Address 101 SW Main St #1100

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Portland | OR | 97204- |

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 14 | | 2014 |

Transaction ID : CN031614123427Ba

Amount of Each Receipt this Period

1000.00

Partnership - see detail

C. Full Name (Last, First, Middle Initial)
Robert Aldisert

Mailing Address 2772 NE Wiberg Ln

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Portland | OR | 97213- |

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Perkins Coie

Lawyer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 17 | | 2014 |

Transaction ID : CN032814084056Ro

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 87

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) Stan Amy | | Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2014 |
| Mailing Address 4109 NE 19th Ave Suite B | | Transaction ID : CN032814090725St |
| City Portland | State OR | |
| Zip Code 97211- | | Amount of Each Receipt this Period 1000.00 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer New Villages Group | Occupation Investor | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1000.00 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) David Angeli | | Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2014 |
| Mailing Address 121 SW Morrison St | | Transaction ID : CN032814083821Da |
| City Portland | State OR | |
| Zip Code 97204- | | Amount of Each Receipt this Period 1000.00 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Angeli Law Group | Occupation Attorney | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1000.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) Suzanne Angelo | | Date of Receipt M M / D D / Y Y Y Y 02 / 12 / 2014 |
| Mailing Address 11865 SW Tremont | | Transaction ID : CN021614093928Su |
| City Portland | State OR | |
| Zip Code 97225- | | Amount of Each Receipt this Period 500.00 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer None | Occupation Retired | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 500.00 | |

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 2500.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

| | | | | | | | | | | | | | |
|---|--|---|---|---------|---|-----|---|---------|----|--|----|--|------|
| A. Full Name (Last, First, Middle Initial) Ray Auel | | Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>03</td> <td></td> <td>2014</td> </tr> </table> | | M M | / | D D | / | Y Y Y Y | 03 | | 03 | | 2014 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | | |
| 03 | | 03 | | 2014 | | | | | | | | | |
| Mailing Address 2020 SW Market St #102 | | Transaction ID : CN030614155721Ra | | | | | | | | | | | |
| City Portland | State OR | Zip Code 97201- | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. <div>C</div> | | Amount of Each Receipt this Period <div>1000.00</div> | | | | | | | | | | | |
| Name of Employer None | Occupation None | | | | | | | | | | | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date <div>3600.00</div> | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Richard Bader | | Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>15</td> <td></td> <td>2014</td> </tr> </table> | | M M | / | D D | / | Y Y Y Y | 03 | | 15 | | 2014 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | | |
| 03 | | 15 | | 2014 | | | | | | | | | |
| Mailing Address 10452 SW Forest Ridge Pl | | Transaction ID : CN031614123055Ri | | | | | | | | | | | |
| City Beaverton | State OR | Zip Code 97007- | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. <div>C</div> | | Amount of Each Receipt this Period <div>250.00</div> | | | | | | | | | | | |
| Name of Employer Easystreet | Occupation President | | | | | | | | | | | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date <div>250.00</div> | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Robert S Banks, Jr. | | Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>21</td> <td></td> <td>2014</td> </tr> </table> | | M M | / | D D | / | Y Y Y Y | 01 | | 21 | | 2014 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | | |
| 01 | | 21 | | 2014 | | | | | | | | | |
| Mailing Address 7823 NW Gales Ridge Ln. | | Transaction ID : CN012714091848Ro | | | | | | | | | | | |
| City Portland | State OR | Zip Code 97229-4247 | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. <div>C</div> | | Amount of Each Receipt this Period <div>250.00</div> | | | | | | | | | | | |
| Name of Employer Banks Law Office, PC | Occupation Attorney | | | | | | | | | | | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date <div>750.00</div> | | | | | | | | | | | | |
| SUBTOTAL of Receipts This Page (optional)..... | | <div>1500.00</div> | | | | | | | | | | | |
| TOTAL This Period (last page this line number only)..... | | <div></div> | | | | | | | | | | | |

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Ann Barkley | | Date of Receipt M M / D D / Y Y Y Y 01 / 03 / 2014 |
| Mailing Address 5539 SW Westdale Dr. | | Transaction ID : CN011214135515An |
| City Portland | State OR | |
| Zip Code 97221- | | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer None | Occupation Retired | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 300.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ann Barkley | | Date of Receipt M M / D D / Y Y Y Y 01 / 21 / 2014 |
| Mailing Address 5539 SW Westdale Dr. | | Transaction ID : CN012714091920An |
| City Portland | State OR | |
| Zip Code 97221- | | Amount of Each Receipt this Period 100.00 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer None | Occupation Retired | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 400.00 | |

| | | |
|---|--------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Patricia Barnes | | Date of Receipt M M / D D / Y Y Y Y 01 / 28 / 2014 |
| Mailing Address 52 Ridgeveiw Terr | | Transaction ID : CN020714085329Pa |
| City Elmsford | State NY | |
| Zip Code 10523- | | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Letter sent: 2/20/2012 | Occupation Letter sent: 2/20/2012 | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 250.00 | |

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 600.00 |
| TOTAL This Period (last page this line number only)..... | |

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

| | | | | | | | | | | | | | |
|---|----------------------------------|---|---|-------------|---|-------|---|-------------|----|--|----|--|------|
| A. Full Name (Last, First, Middle Initial) Richard Bayer | | Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>27</td> <td></td> <td>2014</td> </tr> </table> | | M M M | / | D D D | / | Y Y Y Y Y Y | 02 | | 27 | | 2014 |
| M M M | / | D D D | / | Y Y Y Y Y Y | | | | | | | | | |
| 02 | | 27 | | 2014 | | | | | | | | | |
| Mailing Address 2351 NW Westover Rd Unit 701 | | Transaction ID : CN031614122659Ri | | | | | | | | | | | |
| City Portland | State OR | Zip Code 97210- | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 | | | | | | | | | | | |
| Name of Employer Retired | Occupation None | | | | | | | | | | | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 250.00 | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Sylvia Black | | Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>27</td> <td></td> <td>2014</td> </tr> </table> | | M M M | / | D D D | / | Y Y Y Y Y Y | 03 | | 27 | | 2014 |
| M M M | / | D D D | / | Y Y Y Y Y Y | | | | | | | | | |
| 03 | | 27 | | 2014 | | | | | | | | | |
| Mailing Address 11511 SW 39th Ave | | Transaction ID : CN032814083621Sy | | | | | | | | | | | |
| City Portland | State OR | Zip Code 97219- | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 50.00 | | | | | | | | | | | |
| Name of Employer None | Occupation None | | | | | | | | | | | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 450.00 | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Bob Blancato | | Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>26</td> <td></td> <td>2014</td> </tr> </table> | | M M M | / | D D D | / | Y Y Y Y Y Y | 03 | | 26 | | 2014 |
| M M M | / | D D D | / | Y Y Y Y Y Y | | | | | | | | | |
| 03 | | 26 | | 2014 | | | | | | | | | |
| Mailing Address 1612 K Street, NW | | Transaction ID : CN032814083641Bo | | | | | | | | | | | |
| City Washington | State DC | Zip Code 20006- | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 | | | | | | | | | | | |
| Name of Employer Italian American Democratic Leadership | Occupation Chairman | | | | | | | | | | | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 250.00 | | | | | | | | | | | | |
| SUBTOTAL of Receipts This Page (optional)..... | | 550.00 | | | | | | | | | | | |
| TOTAL This Period (last page this line number only)..... | | | | | | | | | | | | | |

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 87

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) Elizabeth Bonamici | | Date of Receipt M M / D D / Y Y Y Y 03 / 01 / 2014 |
| Mailing Address 2769 Emerald Street | | Transaction ID : CN031614122856EI |
| City Eugene | State OR | Zip Code 97403- |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer university of oregon | Occupation research analyst | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1000.00 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) Jeffrey Bowersox | | Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2014 |
| Mailing Address 5285 Meadow Rd., Ste. 320 | | Transaction ID : CN031614122947Je |
| City Lake Oswego | State OR | Zip Code 97035- |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Bowersox Law Firm | Occupation Attorney | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1000.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) Todd Bradley | | Date of Receipt M M / D D / Y Y Y Y 03 / 14 / 2014 |
| Mailing Address 2798 SW Talbot Rd | | Transaction ID : CN031614123041To |
| City Portland | State OR | Zip Code 97201- |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Gaylord Eyerman Bradley | Occupation Attorney | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 250.00 | |

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 1750.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) Brentley Bullock | | Date of Receipt M M / D D / Y Y Y Y 03 / 12 / 2014 |
| Mailing Address 10510 SE Crest Hill Rd | | Transaction ID : CN031614123000Br |
| City Happy Valley | State OR | Zip Code 97086- |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Perkins Coie | Occupation Attorney | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1000.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) Scott Burgess | | Date of Receipt M M / D D / Y Y Y Y 03 / 14 / 2014 |
| Mailing Address 11455 SW Gallo Ave | | Transaction ID : CN031614123659Sc |
| City Tigard | State OR | Zip Code 97223- |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer None | Occupation None | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 500.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) John Calhoun | | Date of Receipt M M / D D / Y Y Y Y 01 / 25 / 2014 |
| Mailing Address 4717 SW Dosch Park Ln | | Transaction ID : CN020714081311Jo |
| City Portland | State OR | Zip Code 97239- |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 150.00 |
| Name of Employer Inside Valuation Partners | Occupation CEO | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 550.00 | |

| | |
|---|---------------|
| SUBTOTAL of Receipts This Page (optional)..... | 900.00 |
| TOTAL This Period (last page this line number only)..... | |

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 87

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

Full Name (Last, First, Middle Initial)

Diane Collier

Mailing Address 5185 SW 184th Ave

City

Aloha

State

OR

Zip Code

97007-

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | | 27 | | 2014 |

Transaction ID : CN032814083554Di

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Christina Coughlin

Mailing Address 5470 SW Dover Loop

City

Portland

State

OR

Zip Code

97225-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Consultant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 01 | | 16 | | 2014 |

Transaction ID : CN012714091630Ch

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

John Crabb

Mailing Address 12311 NW Jackson Quarry Rd

City

Hillsboro

State

OR

Zip Code

97124-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Tradewest Brokerage

Occupation

Grain Broker

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | | 27 | | 2014 |

Transaction ID : CN032814083545Jo

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

900.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 13 OF 87

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Nancy Crumpacker | | Date of Receipt M M / D D / Y Y Y Y 02 / 28 / 2014 |
| Mailing Address 2351 NW Westover #701 | | Transaction ID : CN031614122844Na |
| City Portland | State OR | |
| Zip Code 97210- | | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer None | Occupation None | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 250.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. Seth Davidow | | Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2014 |
| Mailing Address 4904 Abbott Ave | | Transaction ID : CN040414153507Se |
| City Dallas | State TX | |
| Zip Code 75205- | | Amount of Each Receipt this Period 1000.00 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Information Requested 3/31/14 | Occupation Information Requested 3/31/14 | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1000.00 | |

| | | |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial) C. William Dickey | | Date of Receipt M M / D D / Y Y Y Y 01 / 25 / 2014 |
| Mailing Address 9031 SW 9th Dr. | | Transaction ID : CN020714081214Wi |
| City Portland | State OR | |
| Zip Code 97219- | | Amount of Each Receipt this Period 500.00 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Morel Ink | Occupation Printer | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1000.00 | |

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1750.00 |
| TOTAL This Period (last page this line number only)..... | |

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 14 OF 87

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

Full Name (Last, First, Middle Initial)

Deborah Dotters

Mailing Address 181 W 22nd Ave

City

Eugene

State

OR

Zip Code

97405-

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Physician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 30 | | 2014 |

Transaction ID : CN040414154551De

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Jeffrey Edelson

Mailing Address 3136 SW Gale Ave

City

Portland

State

OR

Zip Code

97239-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Markowitz Herbold Glade & Mehlhaf

Occupation
Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 17 | | 2014 |

Transaction ID : CN032814084033Je

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Amy Edwards

Mailing Address 4315 SE Oak Street

City

Portland

State

OR

Zip Code

97215-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Stoel Rives LLP

Occupation
Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 01 | | 21 | | 2014 |

Transaction ID : CN012714091908Am

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

750.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 15 OF 87

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

A. Full Name (Last, First, Middle Initial)
John Epstein
 Mailing Address 2840 SW 103rd Ave

City State Zip Code
 Portland OR 97225-

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Wells Fargo Bank

Occupation
 Banker

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
 01 27 2014

Transaction ID : CN020714085503Jo

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
Mike Esler
 Mailing Address 11 Mountian Ave

City State Zip Code
 Warrensburg NY 12885-

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Esler Stephens & Buckley

Occupation
 Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
 03 17 2014

Transaction ID : CN032814084012Mi

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
Linda Eyerman
 Mailing Address 1400 SW Montgomery St.

City State Zip Code
 Portland OR 97201-

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Gaylord Eyerman Bradley PC

Occupation
 Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
 03 27 2014

Transaction ID : CN032814083435Li

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

| | | | | | | | | | | | | | |
|---|--|---|--|-----------|--------|-------|---|-----------|--------|--|----|--|------|
| A. Full Name (Last, First, Middle Initial) Steven Fick | | Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>23</td> <td></td> <td>2014</td> </tr> </table> | | M M M | / | D D D | / | Y Y Y Y Y | 01 | | 23 | | 2014 |
| M M M | / | D D D | / | Y Y Y Y Y | | | | | | | | | |
| 01 | | 23 | | 2014 | | | | | | | | | |
| Mailing Address PO Box 715 | | Transaction ID : CN012714085820St | | | | | | | | | | | |
| City Astoria | State OR | Zip Code 97103- | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>250.00</td> </tr> </table> | | | | | | 250.00 | | | | |
| | | | | | 250.00 | | | | | | | | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>250.00</td> </tr> </table> | | | | | | | 250.00 | | | | |
| | | | | | 250.00 | | | | | | | | |
| Name of Employer Fishhawk Fisheries | Occupation President | | | | | | | | | | | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>250.00</td> </tr> </table> | | | | | | | | 250.00 | | | | |
| | | | | | 250.00 | | | | | | | | |

| | | | | | | | | | | | | | |
|---|---|---|---|-----------|---------|-------|---|-----------|---------|--|----|--|------|
| B. Full Name (Last, First, Middle Initial) Phillip Fine | | Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>30</td> <td></td> <td>2014</td> </tr> </table> | | M M M | / | D D D | / | Y Y Y Y Y | 03 | | 30 | | 2014 |
| M M M | / | D D D | / | Y Y Y Y Y | | | | | | | | | |
| 03 | | 30 | | 2014 | | | | | | | | | |
| Mailing Address 181 Middleton Way | | Transaction ID : CN040414153431Ph | | | | | | | | | | | |
| City Sacramento | State CA | Zip Code 95864- | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>1000.00</td> </tr> </table> | | | | | | 1000.00 | | | | |
| | | | | | 1000.00 | | | | | | | | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>1000.00</td> </tr> </table> | | | | | | | 1000.00 | | | | |
| | | | | | 1000.00 | | | | | | | | |
| Name of Employer Information Requested 3/31/14 | Occupation Information Requested 3/31/14 | | | | | | | | | | | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>1105.72</td> </tr> </table> | | | | | | | | 1105.72 | | | | |
| | | | | | 1105.72 | | | | | | | | |

| | | | | | | | | | | | | | |
|---|---|---|--|-----------|---------|-------|---|-----------|---------|--|----|--|------|
| C. Full Name (Last, First, Middle Initial) Carol Fortino | | Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>23</td> <td></td> <td>2014</td> </tr> </table> | | M M M | / | D D D | / | Y Y Y Y Y | 01 | | 23 | | 2014 |
| M M M | / | D D D | / | Y Y Y Y Y | | | | | | | | | |
| 01 | | 23 | | 2014 | | | | | | | | | |
| Mailing Address 428 NW Albemarle Terr | | Transaction ID : CN012714085752Ca | | | | | | | | | | | |
| City Portland | State OR | Zip Code 97210- | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>500.00</td> </tr> </table> | | | | | | 500.00 | | | | |
| | | | | | 500.00 | | | | | | | | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>500.00</td> </tr> </table> | | | | | | | 500.00 | | | | |
| | | | | | 500.00 | | | | | | | | |
| Name of Employer None | Occupation None | | | | | | | | | | | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>1500.00</td> </tr> </table> | | | | | | | | 1500.00 | | | | |
| | | | | | 1500.00 | | | | | | | | |

| | | | | | | | |
|---|---|--|--|--|---------|--|---------|
| SUBTOTAL of Receipts This Page (optional)..... | <table border="1"> <tr> <td colspan="5"></td> <td>1750.00</td> </tr> </table> | | | | | | 1750.00 |
| | | | | | 1750.00 | | |
| TOTAL This Period (last page this line number only)..... | <table border="1"> <tr> <td colspan="5"></td> <td></td> </tr> </table> | | | | | | |
| | | | | | | | |

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

A. Full Name (Last, First, Middle Initial)
Randolph Foster

Mailing Address **PO Box 1632**

City **Portland** State **OR** Zip Code **97075-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Stoel Rives** Occupation **Attorney**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

01 / **15** / **2014**

Transaction ID : **CN012714091613Ra**

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
David Frackelton

Mailing Address **4300 SW Parkview Ave**

City **Portland** State **OR** Zip Code **97225-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **The Canoe Group, Inc.** Occupation **Consultant**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt

01 / **18** / **2014**

Transaction ID : **CN012714091838Da**

Amount of Each Receipt this Period

75.00

C. Full Name (Last, First, Middle Initial)
David Frackelton

Mailing Address **4300 SW Parkview Ave**

City **Portland** State **OR** Zip Code **97225-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **The Canoe Group, Inc.** Occupation **Consultant**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt

01 / **22** / **2014**

Transaction ID : **CN012714092014Da**

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

650.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

| | | | | | | | | | | | | | |
|---|--|---|---|-------------|---|-------|---|-------------|----|--|----|--|------|
| A. Full Name (Last, First, Middle Initial) Karen Freedman | | Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>18</td> <td></td> <td>2014</td> </tr> </table> | | M M M | / | D D D | / | Y Y Y Y Y Y | 01 | | 18 | | 2014 |
| M M M | / | D D D | / | Y Y Y Y Y Y | | | | | | | | | |
| 01 | | 18 | | 2014 | | | | | | | | | |
| Mailing Address 305 SW Montgomery Unit 308 | | Transaction ID : CN012714091817Ka | | | | | | | | | | | |
| City Portland | State OR | Zip Code 97201- | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. <div>C</div> | | Amount of Each Receipt this Period <div>1000.00</div> | | | | | | | | | | | |
| Name of Employer Allmed Healthcare Management | Occupation VP, Health Care | | | | | | | | | | | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date <div>1000.00</div> | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Craig Froude | | Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>25</td> <td></td> <td>2014</td> </tr> </table> | | M M M | / | D D D | / | Y Y Y Y Y Y | 01 | | 25 | | 2014 |
| M M M | / | D D D | / | Y Y Y Y Y Y | | | | | | | | | |
| 01 | | 25 | | 2014 | | | | | | | | | |
| Mailing Address 3860 SW 75th Ave | | Transaction ID : CN020714080848Cr | | | | | | | | | | | |
| City Portland | State OR | Zip Code 97225- | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. <div>C</div> | | Amount of Each Receipt this Period <div>400.00</div> | | | | | | | | | | | |
| Name of Employer Aequitas Capital | Occupation Partner | | | | | | | | | | | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date <div>400.00</div> | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Jill Gelineau | | Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>13</td> <td></td> <td>2014</td> </tr> </table> | | M M M | / | D D D | / | Y Y Y Y Y Y | 01 | | 13 | | 2014 |
| M M M | / | D D D | / | Y Y Y Y Y Y | | | | | | | | | |
| 01 | | 13 | | 2014 | | | | | | | | | |
| Mailing Address 1030 NW 12th Ave Unit 331 | | Transaction ID : CN012714091602Ji | | | | | | | | | | | |
| City Portland | State OR | Zip Code 97209- | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. <div>C</div> | | Amount of Each Receipt this Period <div>250.00</div> | | | | | | | | | | | |
| Name of Employer Schwabe, Williamson & Wyatt | Occupation Attorney | | | | | | | | | | | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date <div>250.00</div> | | | | | | | | | | | | |
| SUBTOTAL of Receipts This Page (optional)..... | | <div>1650.00</div> | | | | | | | | | | | |
| TOTAL This Period (last page this line number only)..... | | <div></div> | | | | | | | | | | | |

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 87
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

| | | |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial) Daniel Gibbs | | Date of Receipt M M / D D / Y Y Y Y Y 03 / 27 / 2014 |
| Mailing Address 2863 NW Fairfax Terr | | Transaction ID : CN032814083603Da |
| City Portland | State OR | |
| Zip Code 97210- | | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer OHSU | Occupation Physician | Amount of Each Receipt this Period 500.00 |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1000.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) James Gidley | | Date of Receipt M M / D D / Y Y Y Y Y 03 / 30 / 2014 |
| Mailing Address 3408 SW Stonebrook Dr | | Transaction ID : CN040414154212Ja |
| City Portland | State OR | |
| Zip Code 97239- | | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Perkins Coie | Occupation Attorney | Amount of Each Receipt this Period 300.00 |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 400.00 | |

| | | |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial) Pat Golding | | Date of Receipt M M / D D / Y Y Y Y Y 01 / 21 / 2014 |
| Mailing Address 2400 SW Scenic Dr. | | Transaction ID : CN012714092002Pa |
| City Portland | State OR | |
| Zip Code 97225- | | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Golding Consulting | Occupation Healthcare consultant | Amount of Each Receipt this Period 75.00 |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 425.00 | |

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 875.00 |
| TOTAL This Period (last page this line number only)..... | |

| | | | |
|---|------------------------------|------------------------------|------------------------------|
| FOR LINE NUMBER: | | PAGE 20 OF 87 | |
| (check only one) | | | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | | <input type="checkbox"/> 15 |

NAME OF COMMITTEE (In Full)
Bonamici for Congress

300.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

| | | | |
|---|----------------------------------|--|--|
| A. Full Name (Last, First, Middle Initial) Katherine Heekin | | Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2014 | |
| Mailing Address 3331 NW Spencer St | | Transaction ID : CN032814084040Ka | |
| City Portland | State OR | Zip Code 97229- | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer The Heekin Law Firm | Occupation lawyer | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 250.00 | | |
| B. Full Name (Last, First, Middle Initial) Nancy Helmsworth | | Date of Receipt M M / D D / Y Y Y Y 03 / 27 / 2014 | |
| Mailing Address 1740 NW Riverscape St | | Transaction ID : CN032814083336Na | |
| City Portland | State OR | Zip Code 97209- | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Riverdale | Occupation Teacher | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 250.00 | | |
| C. Full Name (Last, First, Middle Initial) Neil Jackson | | Date of Receipt M M / D D / Y Y Y Y 01 / 25 / 2014 | |
| Mailing Address 3330 SE Pelton Ave | | Transaction ID : CN020714081227Ne | |
| City Troutdale | State OR | Zip Code 97060- | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Self | Occupation Attorney | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 450.00 | | |
| SUBTOTAL of Receipts This Page (optional)..... | | 750.00 | |
| TOTAL This Period (last page this line number only)..... | | | |

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 22 OF 87

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

A. Full Name (Last, First, Middle Initial)
Don Jarman
 Mailing Address 7760 SW Wilson Ave

City State Zip Code
 Beaverton OR 97008-

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Retired

Occupation
 None

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

M M / D D / Y Y Y Y
 03 27 2014

Transaction ID : CN032814083346Do

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)
Robert Jesenik
 Mailing Address 24770 SW Valley View Rd

City State Zip Code
 West Linn OR 97068-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Letter sent: 2/21/2014

Occupation

Letter sent: 2/21/2014

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
 01 25 2014

Transaction ID : CN020714080911Ro

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
Phillip E. Joseph
 Mailing Address 101 SW Main St #1100

City State Zip Code
 Portland OR 97204-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ball Janik

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

263.04

Date of Receipt

M M / D D / Y Y Y Y
 03 14 2014

Transaction ID : CN041414082135Ph

Amount of Each Receipt this Period

132.96

[MEMO ITEM]
 Partnership attribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

| | | |
|---|-----------------------------------|---|
| Full Name (Last, First, Middle Initial) Al Jubitz | | Date of Receipt M M / D D / Y Y Y Y 02 / 21 / 2014 |
| Mailing Address 5505 SW Hewett Blvd | | Transaction ID : CN031614122141AI |
| City Portland | State OR | |
| Zip Code 97221- | | Amount of Each Receipt this Period 1000.00 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer None | Occupation Retired | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1000.00 | |
| | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) Gregg Kantor | | Date of Receipt M M / D D / Y Y Y Y 03 / 27 / 2014 |
| Mailing Address 1709 SW Westwood Ct. | | Transaction ID : CN032814083405Gr |
| City Portland | State OR | |
| Zip Code 97239- | | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer NW Natural | Occupation Utility executive | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 250.00 | |
| | | |

| | | |
|---|----------------------------------|---|
| Full Name (Last, First, Middle Initial) Carla Kelley | | Date of Receipt M M / D D / Y Y Y Y 02 / 03 / 2014 |
| Mailing Address 10826 NW Appellate Way | | Transaction ID : CN020714085302Ca |
| City Portland | State OR | |
| Zip Code 97229- | | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Port of Portland | Occupation Attorney | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 250.00 | |
| | | |

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1500.00 |
| TOTAL This Period (last page this line number only)..... | |

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

| | | | |
|---|--|--|--|
| A. Full Name (Last, First, Middle Initial) Mark Kelley | | Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014 | |
| Mailing Address 479 Laurel Ave. | | Transaction ID : CN040414160111Ma | |
| City San Anselmo | State CA | Zip Code 94960- | Amount of Each Receipt this Period _____ 250.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Dannis Woliver Kelley | Occupation Lawyer | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date _____ 750.00 | | |
| B. Full Name (Last, First, Middle Initial) Neil Kimmelfield | | Date of Receipt M M / D D / Y Y Y Y 01 / 02 / 2014 | |
| Mailing Address 2330 NE Brazee St | | Transaction ID : CN011214142529Ne | |
| City Portland | State OR | Zip Code 97212- | Amount of Each Receipt this Period _____ 250.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Lane Powell | Occupation Attorney | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date _____ 250.00 | | |
| C. Full Name (Last, First, Middle Initial) Blaine Kozak | | Date of Receipt M M / D D / Y Y Y Y 01 / 18 / 2014 | |
| Mailing Address 4522 SW Greenhills Way | | Transaction ID : CN012714091827BI | |
| City Portland | State OR | Zip Code 97221- | Amount of Each Receipt this Period _____ 500.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Radiology Consultants | Occupation Physician | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date _____ 500.00 | | |
| SUBTOTAL of Receipts This Page (optional)..... | | _____ 1000.00 | |
| TOTAL This Period (last page this line number only)..... | | _____ | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

A. Full Name (Last, First, Middle Initial)
Hilary Krane

Mailing Address 4636 SW Humphrey Ct

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Portland | OR | 97221- |

FEC ID number of contributing
federal political committee.

C

Name of Employer
Nike, Inc.Occupation
Executive

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 27 | | 2014 |

Transaction ID : CN031614122635Hi

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Claudia Kyle

Mailing Address 2324 Thrush Ct SE

| | | |
|-------|-------|----------|
| City | State | Zip Code |
| Salem | OR | 97306- |

FEC ID number of contributing
federal political committee.

C

Name of Employer

Letter sent: 9/19/2011

Occupation

Letter sent: 9/19/2011

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 01 | | 24 | | 2014 |

Transaction ID : CN012714091542CI

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
Larry Larocco

Mailing Address 1219 N. 6Th St.

| | | |
|-------|-------|----------|
| City | State | Zip Code |
| Boise | ID | 83702- |

FEC ID number of contributing
federal political committee.

C

Name of Employer

LaRocco & Associates, Inc.

Occupation

government relations/public affairs

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 28 | | 2014 |

Transaction ID : CN031614122741La

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1750.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:

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(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

Full Name (Last, First, Middle Initial)

Matthew LaRocco

Mailing Address 420 7th St NW

City

Washington

State

DC

Zip Code

20004-

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Lobbyist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 28 | | 2014 |

Transaction ID : CN040514065932Ma

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

John MacDonald

Mailing Address 8893 NW Savoy Ln

City

Portland

State

OR

Zip Code

97229-

FEC ID number of contributing
federal political committee.

C

Name of Employer
Grant Thornton LLPOccupation
Consultant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 21 | | 2014 |

Transaction ID : CN022314104412Jo

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Andrew Macritchie

Mailing Address 13017 SW Knaus Rd

City

Lake Oswego

State

OR

Zip Code

97034-

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aequitas CapitalOccupation
Executive

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 01 | | 25 | | 2014 |

Transaction ID : CN020714080738An

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

900.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

A. Full Name (Last, First, Middle Initial)
Jim McDermott
Mailing Address 1011 SW Vista Ave.

City State Zip Code
Portland OR 97205-

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ball Janik LLP

Occupation
Attorney

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
205.51

Date of Receipt

M M / D D / Y Y Y Y
03 14 2014

Transaction ID : CN041414082200Ji

Amount of Each Receipt this Period

103.88

[MEMO ITEM]
Partnership attribution

B. Full Name (Last, First, Middle Initial)
Steven McGeady
Mailing Address 2229 NE Thompson St

City State Zip Code
Portland OR 97212-

FEC ID number of contributing
federal political committee.

C

Name of Employer
ShiftWise

Occupation
Chairman

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

M M / D D / Y Y Y Y
01 10 2014

Transaction ID : CN011214142637St

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
Debbie Menashe
Mailing Address 6845 SE 28th Ave

City State Zip Code
Portland OR 97202-

FEC ID number of contributing
federal political committee.

C

Name of Employer
Energy Trust

Occupation
Attorney

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

M M / D D / Y Y Y Y
03 19 2014

Transaction ID : CN032814083931De

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

A. Full Name (Last, First, Middle Initial)
Martin Mendelson

Mailing Address 1585 NW 117Th Court

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Portland | OR | 97229- |

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Consultant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

322.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 07 | | 2014 |

Transaction ID : CN021614094119Ma

Amount of Each Receipt this Period

72.00

B. Full Name (Last, First, Middle Initial)
Martin Mendelson

Mailing Address 1585 NW 117Th Court

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Portland | OR | 97229- |

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Consultant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

522.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 28 | | 2014 |

Transaction ID : CN031614122722Ma

Amount of Each Receipt this Period

200.00

C. Full Name (Last, First, Middle Initial)
Brian Oliver

Mailing Address 14633 Ehlen Rd NE

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Aurora | OR | 97002- |

FEC ID number of contributing
federal political committee.

C

Name of Employer
Letter sent: 2/21/2014Occupation
Letter sent: 2/21/2014

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 01 | | 25 | | 2014 |

Transaction ID : CN020714080934Br

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

672.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 29 OF 87

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) Erin Olson | | Date of Receipt M M / D D / Y Y Y Y 02 / 09 / 2014 |
| Mailing Address 2014 NE Broadway St | | Transaction ID : CN021614094033Er |
| City Portland | State OR | |
| Zip Code 97232- | | Amount of Each Receipt this Period 500.00 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Self employed | Occupation Attorney | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 500.00 | |
| | | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) Nancy Oseran | | Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2014 |
| Mailing Address 2445 NW Westover Rd #511 | | Transaction ID : CN040414154511Na |
| City Portland | State OR | |
| Zip Code 97210- | | Amount of Each Receipt this Period 500.00 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer None | Occupation None | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 500.00 | |
| | | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) Karen Packer | | Date of Receipt M M / D D / Y Y Y Y 01 / 27 / 2014 |
| Mailing Address 21355 SW Hillsboro Hwy. | | Transaction ID : CN020714085446Ka |
| City Newberg | State OR | |
| Zip Code 97132- | | Amount of Each Receipt this Period 100.00 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 300.00 |
| Name of Employer None | Occupation Retired | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 300.00 | |
| | | |

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1100.00 |
| TOTAL This Period (last page this line number only)..... | |

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 30 OF 87

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

| | | | | | | | | | | | | | |
|---|--|---|---|---------|---|-----|---|---------|----|--|----|--|------|
| A. Full Name (Last, First, Middle Initial) Kevin Paillet | | Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>31</td> <td></td> <td>2014</td> </tr> </table> | | M M | / | D D | / | Y Y Y Y | 03 | | 31 | | 2014 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | | |
| 03 | | 31 | | 2014 | | | | | | | | | |
| Mailing Address 11325 Chicot Dr | | Transaction ID : CN040414160046Ke | | | | | | | | | | | |
| City Dallas | State TX | Zip Code 75230- | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. <div>C</div> | | Amount of Each Receipt this Period <div>1000.00</div> | | | | | | | | | | | |
| Name of Employer Marsh & McLennan | Occupation senior VP | | | | | | | | | | | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date <div>1000.00</div> | | | | | | | | | | | | |

| | | | | | | | | | | | | | |
|---|---|---|---|---------|---|-----|---|---------|----|--|----|--|------|
| B. Full Name (Last, First, Middle Initial) Steven O. Palmer | | Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>14</td> <td></td> <td>2014</td> </tr> </table> | | M M | / | D D | / | Y Y Y Y | 03 | | 14 | | 2014 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | | |
| 03 | | 14 | | 2014 | | | | | | | | | |
| Mailing Address 5827 N 27th St | | Transaction ID : CN031614123649St | | | | | | | | | | | |
| City Arlington | State VA | Zip Code 22207- | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. <div>C</div> | | Amount of Each Receipt this Period <div>250.00</div> | | | | | | | | | | | |
| Name of Employer Van Scoyoc | Occupation Lobbyist | | | | | | | | | | | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date <div>750.00</div> | | | | | | | | | | | | |

| | | | | | | | | | | | | | |
|---|--|---|---|---------|---|-----|---|---------|----|--|----|--|------|
| C. Full Name (Last, First, Middle Initial) Richard Parker III | | Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>25</td> <td></td> <td>2014</td> </tr> </table> | | M M | / | D D | / | Y Y Y Y | 01 | | 25 | | 2014 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | | |
| 01 | | 25 | | 2014 | | | | | | | | | |
| Mailing Address 2345 SW Scholls Ferry Rd | | Transaction ID : CN020714081054Ri | | | | | | | | | | | |
| City Portland | State OR | Zip Code 97221- | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. <div>C</div> | | Amount of Each Receipt this Period <div>2600.00</div> | | | | | | | | | | | |
| Name of Employer United Finance | Occupation President | | | | | | | | | | | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date <div>2600.00</div> | | | | | | | | | | | | |

| | |
|---|--------------------|
| SUBTOTAL of Receipts This Page (optional)..... | <div>3850.00</div> |
| TOTAL This Period (last page this line number only)..... | <div></div> |

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 31 OF 87

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

A. Full Name (Last, First, Middle Initial)
George Pernsteiner

Mailing Address 3748 SE Lincoln St

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Portland | OR | 97214- |

FEC ID number of contributing
federal political committee.

C

Name of Employer
Oregon University System

Occupation
Executive

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 19 | | 2014 |

Transaction ID : CN032814083854Ge

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
Don Petersen

Mailing Address 10240 SW Hawthorne Ln.

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Portland | OR | 97225- |

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Lawyer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 01 | | 30 | | 2014 |

Transaction ID : CN020714085316Do

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
Malin Lee Petrusich

Mailing Address 7935 SW Broadmoor Terr

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Portland | OR | 97225- |

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Homemaker

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 01 | | 25 | | 2014 |

Transaction ID : CN020714081149Ma

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) Stephen Piucci | | Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 27 / 2014 |
| Mailing Address 900 SW 13th Ave | | Transaction ID : CN032814083612St |
| City Portland | State OR | |
| Zip Code 97205- | | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Self | Occupation Attorney | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 750.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) James Prichard | | Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 14 / 2014 |
| Mailing Address 101 SW Main St #1100 | | Transaction ID : CN041414082253Ja |
| City Portland | State OR | |
| Zip Code 97204- | | Amount of Each Receipt this Period 132.96 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Ball Janik | Occupation Attorney | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 263.04 | [MEMO ITEM] Partnership attribution |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) Phillip Querin | | Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 06 / 2014 |
| Mailing Address 121 SW Salmon St. Suite 1100 | | Transaction ID : CN011214142606Ph |
| City Portland | State OR | |
| Zip Code 97204- | | Amount of Each Receipt this Period 1000.00 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Self employed | Occupation Lawyer | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1500.00 | |

| | |
|---|----------------|
| SUBTOTAL of Receipts This Page (optional)..... | 1250.00 |
| TOTAL This Period (last page this line number only)..... | |

| | | | | | | | | | |
|---|-----|--|-----|--|-----|--|-----|--|----|
| ✕ | 11a | | 11b | | 11c | | 11d | | |
| | 12 | | 13a | | 13b | | 14 | | 15 |

NAME OF COMMITTEE (In Full)
Bonamici for Congress

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) Bruce Rubin | | Date of Receipt M M / D D / Y Y Y Y 03 / 14 / 2014 |
| Mailing Address 4114 SW 44th Ave | | Transaction ID : CN031614123013Br |
| City Portland | State OR | Zip Code 97221- |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Miller Nash, LLP | Occupation lawyer | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 500.00 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) Joel Rubin | | Date of Receipt M M / D D / Y Y Y Y 02 / 05 / 2014 |
| Mailing Address 2724 Blaine Dr | | Transaction ID : CN020714085243Jo |
| City Chevy Chase | State MD | Zip Code 20815- |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 400.00 |
| Name of Employer CFM Strategic Communications | Occupation VP Government Affairs | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1900.00 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) Joel Rubin | | Date of Receipt M M / D D / Y Y Y Y 02 / 05 / 2014 |
| Mailing Address 2724 Blaine Dr | | Transaction ID : CN020714085211Jo |
| City Chevy Chase | State MD | Zip Code 20815- |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1100.00 |
| Name of Employer CFM Strategic Communications | Occupation VP Government Affairs | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 3000.00 | |

| | |
|---|----------------|
| SUBTOTAL of Receipts This Page (optional)..... | 2000.00 |
| TOTAL This Period (last page this line number only)..... | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 35 OF 87

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

A. Full Name (Last, First, Middle Initial)
Bonnie Serkin

Mailing Address PO Box 12085

City State Zip Code
Portland OR 97212-

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Double E Northwest, Inc. Chief Operating Officer

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 31 | | 2014 |

Transaction ID : CN040414155704Bo

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
Jonathan Slade

Mailing Address 10613 Gainsborough Rd

City State Zip Code
Potomac MD 20854-

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Letter sent: 3/17/2014 Letter sent: 3/17/2014

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | | 21 | | 2014 |

Transaction ID : CN022314105308Jo

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
Marc Slotnick

Mailing Address 1926 Parkwood Rd

City State Zip Code
Charleston WV 25314-

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Bailey & Wyant Attorney

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 31 | | 2014 |

Transaction ID : CN040414155934Ma

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

| |
|---------|
| 1750.00 |
|---------|

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

Full Name (Last, First, Middle Initial)

Albert Starr**A.**

Mailing Address 9155 SW Barnes Rd #240

City

Portland

State

OR

Zip Code

97225-

FEC ID number of contributing
federal political committee.

C

Name of Employer
ProvidenceOccupation
Physician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 01 | | 18 | | 2014 |

Transaction ID : CN012714091730AI

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Marilynn Stribling**B.**

Mailing Address 2225 NW Wheatfield Way

City

Portland

State

OR

Zip Code

97229-

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested 3/31/14Occupation
Information Requested 3/31/14

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | | 30 | | 2014 |

Transaction ID : CN040414154613Ma

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

Benjamin Stutz**C.**

Mailing Address 1128 Englewood Dr

City

Lake Oswego

State

OR

Zip Code

97034-

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self employedOccupation
Businessperson

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | | 24 | | 2014 |

Transaction ID : CN032814083657Be

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

1800.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

| | | | | | | | | | | | | | |
|---|--|---|---|-----------|---|-------|---|-----------|----|--|----|--|------|
| A. Full Name (Last, First, Middle Initial) David Sugerman | | Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>20</td> <td></td> <td>2014</td> </tr> </table> | | M M M | / | D D D | / | Y Y Y Y Y | 03 | | 20 | | 2014 |
| M M M | / | D D D | / | Y Y Y Y Y | | | | | | | | | |
| 03 | | 20 | | 2014 | | | | | | | | | |
| Mailing Address 2844 NE 22nd Ave | | Transaction ID : CN032814083840Da | | | | | | | | | | | |
| City Portland | State OR | Zip Code 97212- | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. <div>C</div> | | Amount of Each Receipt this Period <div>500.00</div> | | | | | | | | | | | |
| Name of Employer Self | Occupation Attorney | | | | | | | | | | | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date <div>500.00</div> | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Anne Taft | | Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>03</td> <td></td> <td>2014</td> </tr> </table> | | M M M | / | D D D | / | Y Y Y Y Y | 01 | | 03 | | 2014 |
| M M M | / | D D D | / | Y Y Y Y Y | | | | | | | | | |
| 01 | | 03 | | 2014 | | | | | | | | | |
| Mailing Address 38 Oakridge Dr | | Transaction ID : CN011214135435An | | | | | | | | | | | |
| City Binghamton | State NY | Zip Code 13903- | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. <div>C</div> | | Amount of Each Receipt this Period <div>2600.00</div> | | | | | | | | | | | |
| Name of Employer Self employed | Occupation Investor | | | | | | | | | | | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date <div>2600.00</div> | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Keith Thomson | | Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>30</td> <td></td> <td>2014</td> </tr> </table> | | M M M | / | D D D | / | Y Y Y Y Y | 03 | | 30 | | 2014 |
| M M M | / | D D D | / | Y Y Y Y Y | | | | | | | | | |
| 03 | | 30 | | 2014 | | | | | | | | | |
| Mailing Address 3135 NW Circle A Dr | | Transaction ID : CN040414153759Ke | | | | | | | | | | | |
| City Portland | State OR | Zip Code 97229- | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. <div>C</div> | | Amount of Each Receipt this Period <div>250.00</div> | | | | | | | | | | | |
| Name of Employer Letter sent: 7/11/2012 | Occupation Letter sent: 7/11/2012 | | | | | | | | | | | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date <div>250.00</div> | | | | | | | | | | | | |
| SUBTOTAL of Receipts This Page (optional)..... | | <div>3350.00</div> | | | | | | | | | | | |
| TOTAL This Period (last page this line number only)..... | | <div></div> | | | | | | | | | | | |

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

| | | | | | | | | | | | | | |
|---|---|---|---|-----------|---|-------|---|-----------|----|--|----|--|------|
| A. Full Name (Last, First, Middle Initial) Lynn Tobias | | Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>27</td> <td></td> <td>2014</td> </tr> </table> | | M M M | / | D D D | / | Y Y Y Y Y | 01 | | 27 | | 2014 |
| M M M | / | D D D | / | Y Y Y Y Y | | | | | | | | | |
| 01 | | 27 | | 2014 | | | | | | | | | |
| Mailing Address 3100 NE Alameda St | | Transaction ID : CN020714085400Ly | | | | | | | | | | | |
| City Portland | State OR | Zip Code 97212- | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. <div>C</div> | | Amount of Each Receipt this Period <div>100.00</div> | | | | | | | | | | | |
| Name of Employer self | Occupation Education consulting | | | | | | | | | | | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date <div>850.00</div> | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Clifford Trow | | Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>23</td> <td></td> <td>2014</td> </tr> </table> | | M M M | / | D D D | / | Y Y Y Y Y | 01 | | 23 | | 2014 |
| M M M | / | D D D | / | Y Y Y Y Y | | | | | | | | | |
| 01 | | 23 | | 2014 | | | | | | | | | |
| Mailing Address 1835 NW Juniper Pl | | Transaction ID : CN012714085807CI | | | | | | | | | | | |
| City Corvallis | State OR | Zip Code 97330- | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. <div>C</div> | | Amount of Each Receipt this Period <div>250.00</div> | | | | | | | | | | | |
| Name of Employer None | Occupation retired | | | | | | | | | | | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date <div>250.00</div> | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Julie Vacura | | Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>17</td> <td></td> <td>2014</td> </tr> </table> | | M M M | / | D D D | / | Y Y Y Y Y | 03 | | 17 | | 2014 |
| M M M | / | D D D | / | Y Y Y Y Y | | | | | | | | | |
| 03 | | 17 | | 2014 | | | | | | | | | |
| Mailing Address 2815 NE Alameda | | Transaction ID : CN032814084025Ju | | | | | | | | | | | |
| City Portland | State OR | Zip Code 97212- | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. <div>C</div> | | Amount of Each Receipt this Period <div>500.00</div> | | | | | | | | | | | |
| Name of Employer Self | Occupation Attorney | | | | | | | | | | | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date <div>500.00</div> | | | | | | | | | | | | |
| SUBTOTAL of Receipts This Page (optional)..... | | <div>850.00</div> | | | | | | | | | | | |
| TOTAL This Period (last page this line number only)..... | | <div></div> | | | | | | | | | | | |

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

A. Full Name (Last, First, Middle Initial)
Mary VanderWeele
 Mailing Address 2330 SW Imperial Ct.

City State Zip Code
 Portland OR 97225-

FEC ID number of contributing
federal political committee.

C

Name of Employer
 NIKE

Occupation
 Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
 02 25 2014

Transaction ID : CN031614122307Ma

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
Jerry Vest, Jr.
 Mailing Address 716 Fairview Rd

City State Zip Code
 Pittsburgh PA 15238-

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Information Requested 3/31/14

Occupation
 Information Requested 3/31/14

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
 03 28 2014

Transaction ID : CN040414155236Je

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
Donald Washburn
 Mailing Address 255 SW Harrison St #24-B

City State Zip Code
 Portland OR 97201-

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Self

Occupation
 Investor

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
 02 11 2014

Transaction ID : CN021614094012Do

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

750.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

A. Full Name (Last, First, Middle Initial)
John Wechkin
 Mailing Address 2005 E Crescent Dr

City State Zip Code
 Seattle WA 98112-

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Perkins Coie

Occupation
 Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

800.00

Date of Receipt

M M / D D / Y Y Y Y
 03 18 2014

Transaction ID : CN032814084001Jo

Amount of Each Receipt this Period

800.00

B. Full Name (Last, First, Middle Initial)
Valerie Stackhouse West
 Mailing Address 2509 N McKinley St

City State Zip Code
 Arlington VA 22207-

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Information Requested 3/31/14

Occupation
 Information Requested 3/31/14

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
 03 30 2014

Transaction ID : CN040414154709Va

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
Clarinda White
 Mailing Address 1564 NW Midlake Ln

City State Zip Code
 Beaverton OR 97006-

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Self

Occupation
 Fundraiser

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
 02 22 2014

Transaction ID : CN031614122232CI

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1550.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

| | | | | |
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| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

A. Full Name (Last, First, Middle Initial)
Homer Williams
 Mailing Address 1308 NW Everett St

City State Zip Code
 Portland OR 97209-

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Homer/Dame

Occupation
 Developer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 01 03 2014

Transaction ID : CN011214135236Ho

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
William Winther
 Mailing Address 31323 SW French Prairie Rd

City State Zip Code
 Wilsonville OR 97070-

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Vanguard EMS Inc

Occupation
 Electronic manufacturing

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
 03 27 2014

Transaction ID : CN032814083419Wi

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
Elizabeth Yeats
 Mailing Address 10330 SW Melnore

City State Zip Code
 Portland OR 97225-

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Retired

Occupation
 None

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
 02 21 2014

Transaction ID : CN022314104631EI

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

| | | | | |
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| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

| | | | |
|---|-----------------------------------|--|---|
| A. Full Name (Last, First, Middle Initial) Jay Zidell | | Date of Receipt M M / D D / Y Y Y Y 02 / 21 / 2014 | |
| Mailing Address 3121 SW Moody Ave | | Transaction ID : CN022314105006Ja | |
| City Portland | State OR | Zip Code 97239- | Amount of Each Receipt this Period 1000.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Zidell | Occupation CEO | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 2000.00 | | |
| B. Full Name (Last, First, Middle Initial) Michael Zimmerman | | Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014 | |
| Mailing Address 4623 Stone Hollow Way | | Transaction ID : CN040414155819Mi | |
| City Dallas | State TX | Zip Code 75287- | Amount of Each Receipt this Period 1000.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Self | Occupation Real estate | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1000.00 | | |
| C. Full Name (Last, First, Middle Initial) | | Date of Receipt M M / D D / Y Y Y Y | |
| Mailing Address | | | |
| City | State | Zip Code | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer | Occupation | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date | | |
| SUBTOTAL of Receipts This Page (optional)..... | | 2000.00 | |
| TOTAL This Period (last page this line number only)..... | | 54397.00 | |

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

| | | | | |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

Full Name (Last, First, Middle Initial)

AFGE PAC

Mailing Address 80 F Street NW

City

Washington

State

DC

Zip Code

20001-

FEC ID number of contributing
federal political committee.**C** C70000104

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 01 | | 25 | | 2014 |

Transaction ID : CN020714081004AF

Amount of Each Receipt this Period

1000.00

B. American Society of Anesthesiologists PAC

Full Name (Last, First, Middle Initial)

American Society of Anesthesiologists PAC

Mailing Address 520 N Northwest Highway

City

Park Ridge

State

IL

Zip Code

60068-

FEC ID number of contributing
federal political committee.**C** C00255752

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 01 | | 06 | | 2014 |

Transaction ID : CN011214135918Am

Amount of Each Receipt this Period

1000.00

C. Bakery, Confectionery, Tobacco Workers PAC

Full Name (Last, First, Middle Initial)

Bakery, Confectionery, Tobacco Workers PAC

Mailing Address 10401 Connecticut Av

City

Kensington

State

MD

Zip Code

20895-

FEC ID number of contributing
federal political committee.**C** C70001888

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 03 | | 2014 |

Transaction ID : CN030614155558Ba

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

3000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

| | | | | |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

A. Full Name (Last, First, Middle Initial)
Boilermakers-Blacksmiths Legislative Educatio

Mailing Address **753 State Ave**
Suite 565

City State Zip Code
Kansas City KS 66101-

FEC ID number of contributing
federal political committee.

C **C70002506**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

03 / 30 / 2014

Transaction ID : **CN040414154416Bo**

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Bricklayers & Allied Craftworkers PAC

Mailing Address **620 F Street NW**

City State Zip Code
Washington DC 20004-

FEC ID number of contributing
federal political committee.

C **C70000344**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

03 / 28 / 2014

Transaction ID : **CN040414155124Br**

Amount of Each Receipt this Period

2500.00

C. Full Name (Last, First, Middle Initial)
UAW V CAP

Mailing Address **800 East Jefferson Ave**

City State Zip Code
Detroit MI 48214-

FEC ID number of contributing
federal political committee.

C **C00002840**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

03 / 14 / 2014

Transaction ID : **CN031614123623UA**

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

| | | | | |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

Full Name (Last, First, Middle Initial)

A. American Council of Engineering Co. (ACEC PAC)

Mailing Address 1015 15th St NW

City

Washington

State

DC

Zip Code

20005-

FEC ID number of contributing federal political committee.

C C00010868

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 03 / 2014

Transaction ID : CN030614155639Am

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Intel PAC

Mailing Address 1155 F Street, NW
Suite 1025

City

Washington

State

DC

Zip Code

20004-

FEC ID number of contributing federal political committee.

C C00125641

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 14 / 2014

Transaction ID : CN040614163510In

Amount of Each Receipt this Period

1100.00

Full Name (Last, First, Middle Initial)

C. Intel PAC

Mailing Address 1155 F Street, NW
Suite 1025

City

Washington

State

DC

Zip Code

20004-

FEC ID number of contributing federal political committee.

C C00125641

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

6400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 14 / 2014

Transaction ID : CN031614123528In

Amount of Each Receipt this Period

1400.00

SUBTOTAL of Receipts This Page (optional).....

3500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

A. Full Name (Last, First, Middle Initial)
Raytheon PAC

Mailing Address 1100 Wilson Blvd #1500

City State Zip Code
Arlington VA 22209-

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt

M M / D D / Y Y Y Y
02 10 2014

Transaction ID : CN021614092555Ra

Amount of Each Receipt this Period

1500.00

B. Full Name (Last, First, Middle Initial)
Engineers PAC

Mailing Address 1125 17th St NW

City State Zip Code
Washington DC 20036-

FEC ID number of contributing federal political committee. **C** C00029504

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt

M M / D D / Y Y Y Y
03 30 2014

Transaction ID : CN040414154342En

Amount of Each Receipt this Period

2500.00

C. Full Name (Last, First, Middle Initial)
Anheuser-Busch PAC

Mailing Address One Busch Pl
Suite 202-7

City State Zip Code
St. Louis MO 63118-

FEC ID number of contributing federal political committee. **C** C00034488

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt

M M / D D / Y Y Y Y
03 28 2014

Transaction ID : CN040414154946An

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

| | | | | |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

A. Full Name (Last, First, Middle Initial)
Anna PAC

Mailing Address 555 Capitol Mall STE 1425

| | | |
|--------------------|-------------|--------------------|
| City Sacramento | State CA | Zip Code 95814- |
|--------------------|-------------|--------------------|

FEC ID number of contributing federal political committee. **C** C00557850

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 2000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | | 28 | | 2014 |

Transaction ID : CN040414155049AN

Amount of Each Receipt this Period

| |
|---------|
| 2000.00 |
|---------|

B. Full Name (Last, First, Middle Initial)
Lucille Roybal-Allard for Congress

Mailing Address PO Box 582

| | | |
|--------------------|-------------|--------------------|
| City Kensington | State MD | Zip Code 20895- |
|--------------------|-------------|--------------------|

FEC ID number of contributing federal political committee. **C** C00259143

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | | 31 | | 2014 |

Transaction ID : CN040514060221Lu

Amount of Each Receipt this Period

| |
|---------|
| 1000.00 |
|---------|

C. Full Name (Last, First, Middle Initial)
CH2M Hill PAC

Mailing Address 9191 S Jamaica St

| | | |
|-------------------|-------------|--------------------|
| City Englewood | State CO | Zip Code 80112- |
|-------------------|-------------|--------------------|

FEC ID number of contributing federal political committee. **C** C00143305

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | | 30 | | 2014 |

Transaction ID : CN040414154402CH

Amount of Each Receipt this Period

| |
|---------|
| 1000.00 |
|---------|

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

| |
|---------|
| 4000.00 |
|---------|

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

A. Full Name (Last, First, Middle Initial)
K&L Gates LLP PAC

Mailing Address 1601 K St NW

City State Zip Code
Washington DC 20006-

FEC ID number of contributing federal political committee. **C** C00213173

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt

M M / D D / Y Y Y Y
03 14 2014

Transaction ID : CN031614123540K&

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Genesee & Wyoming Inc PAC

Mailing Address 3601 Concord Rd
2nd Floor

City State Zip Code
York PA 17402-

FEC ID number of contributing federal political committee. **C** C00289058

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt

M M / D D / Y Y Y Y
03 28 2014

Transaction ID : CN040414155157Ge

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Boeing PAC

Mailing Address 1200 Wilson Blvd

City State Zip Code
Arlington VA 22209-

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt

M M / D D / Y Y Y Y
03 24 2014

Transaction ID : CN032814090539Bo

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

A. Full Name (Last, First, Middle Initial)
Western Sugar Cooperative PAC

Mailing Address 400 Great Western Ave

City State Zip Code
 Lovell WY 82431-

FEC ID number of contributing
federal political committee.

C C00446674

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
 03 31 2014

Transaction ID : CN041314215601We

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
American Dental PAC

Mailing Address 1111 14th St NW
 Suite 1100

City State Zip Code
 Washington DC 20005-

FEC ID number of contributing
federal political committee.

C C00000729

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y
 01 06 2014

Transaction ID : CN011214140102Am

Amount of Each Receipt this Period

1500.00

C. Full Name (Last, First, Middle Initial)
Weyerhaeuser PAC

Mailing Address 400 N. Capitol St NW
 Suite 490

City State Zip Code
 Washington DC 20001-

FEC ID number of contributing
federal political committee.

C C00007948

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
 02 21 2014

Transaction ID : CN022314105211We

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

| | | | | |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

A. Full Name (Last, First, Middle Initial)
Snake River Sugar Co. PAC

Mailing Address 3184 Elder St

| | | |
|-------|-------|----------|
| City | State | Zip Code |
| Boise | ID | 83705- |

FEC ID number of contributing
federal political committee.

C C00326389

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 14 | | 2014 |

Transaction ID : CN031614123557Sn

Amount of Each Receipt this Period

1500.00

B. Full Name (Last, First, Middle Initial)
TIAA-CREF PAC

Mailing Address 601 13th Street NW
Suite 700 North

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20005- |

FEC ID number of contributing
federal political committee.

C C00431361

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 28 | | 2014 |

Transaction ID : CN040414155307TI

Amount of Each Receipt this Period

1500.00

C. Full Name (Last, First, Middle Initial)
National Beer Wholesalers Assn PAC

Mailing Address 1101 King Street, Suite 600

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Alexandria | VA | 22314- |

FEC ID number of contributing
federal political committee.

C C00144766

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 28 | | 2014 |

Transaction ID : CN040414155255Na

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

Full Name (Last, First, Middle Initial)

Novo Nordisk PAC

Mailing Address 1155 F Street NW #1150

City

Washington

State

DC

Zip Code

20004-

FEC ID number of contributing
federal political committee.

C C00424838

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 14 / 2014

Transaction ID : CN031614123639No

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Nat'l Emergency Medicine PAC (NEMPAC)

Mailing Address PO Box 619911

City

Dallas

State

TX

Zip Code

75261-

FEC ID number of contributing
federal political committee.

C C00140061

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : CN041314215536Na

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Fluor Corporation PAC

Mailing Address 403 East Capitol St SE

City

Washington

State

DC

Zip Code

20003-

FEC ID number of contributing
federal political committee.

C C00034132

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : CN041314215453FI

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional).....

3500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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| | | | | |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

A. Full Name (Last, First, Middle Initial)
Alaska Air Group Inc PAC

Mailing Address **PO Box 68900**

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Seattle | WA | 98168- |

FEC ID number of contributing federal political committee.

C C00024349

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 30 | | 2014 |

Transaction ID : **CN040414154430AI**

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address **14 Arrow St**

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Cambridge | MA | 02138- |

FEC ID number of contributing federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2875.28

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01 | | 05 | | 2014 |

Transaction ID : **CN011214134353Ac**

Amount of Each Receipt this Period

78.34

[MEMO ITEM]

Conduit: 5 donors; PAC limit not affected

C. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address **14 Arrow St**

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Cambridge | MA | 02138- |

FEC ID number of contributing federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2885.28

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01 | | 12 | | 2014 |

Transaction ID : **CN020714090617Ac**

Amount of Each Receipt this Period

10.00

[MEMO ITEM]

conduit: 1 donor; PAC limit not affected

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

| | | | | |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

Full Name (Last, First, Middle Initial)

ActBlue

Mailing Address 14 Arrow St

City

Cambridge

State

MA

Zip Code

02138-

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2895.28

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 20 / 2014

Transaction ID : CN020714090639Ac

Amount of Each Receipt this Period

10.00

[MEMO ITEM]

conduit; 1 donor; PAC limit not affected

Full Name (Last, First, Middle Initial)

ActBlue

Mailing Address 14 Arrow St

City

Cambridge

State

MA

Zip Code

02138-

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2930.28

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 09 / 2014

Transaction ID : CN031614124855Ac

Amount of Each Receipt this Period

35.00

[MEMO ITEM]

conduit; 2 donors; PAC limit not affected

Full Name (Last, First, Middle Initial)

ActBlue

Mailing Address 14 Arrow St

City

Cambridge

State

MA

Zip Code

02138-

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2950.28

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 17 / 2014

Transaction ID : CN022314110709Ac

Amount of Each Receipt this Period

20.00

[MEMO ITEM]

Conduit: 2 donors; PAC limit not affected

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | |
|------------------------------------|-------------------------------------|--|------------------------------------|-----------------------------|
| <input type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input checked="" type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 | <input type="checkbox"/> 15 |
|------------------------------------|-------------------------------------|--|------------------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

| | | | | | | | | | | | | | |
|---|--|---|-----|-----|---------|----|----|------|--|---------|--|--|---------|
| Full Name (Last, First, Middle Initial) ActBlue | | Date of Receipt <table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td>09</td> <td>2014</td> </tr> </table> | M M | D D | Y Y Y Y | 03 | 09 | 2014 | | | | | |
| M M | D D | Y Y Y Y | | | | | | | | | | | |
| 03 | 09 | 2014 | | | | | | | | | | | |
| Mailing Address 14 Arrow St | | Transaction ID : CN031614124948Ac | | | | | | | | | | | |
| City Cambridge | State MA | | | | | | | | | | | | |
| Zip Code 02138- | | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10"></td> <td>26.73</td> </tr> </table> | | | | | | | | | | | 26.73 |
| | | | | | | | | | | 26.73 | | | |
| FEC ID number of contributing federal political committee. C C00401224 | | [MEMO ITEM] conduit: 3 donors; PAC limit not affected | | | | | | | | | | | |
| Name of Employer | Occupation | | | | | | | | | | | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date <table border="1"> <tr> <td colspan="10"></td> <td>2977.01</td> </tr> </table> | | | | | | | | | | | | 2977.01 |
| | | | | | | | | | | 2977.01 | | | |

| | | | | | | | | | | | | | |
|---|--|---|-----|-----|---------|----|----|------|--|---------|--|--|---------|
| Full Name (Last, First, Middle Initial) ActBlue | | Date of Receipt <table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td>16</td> <td>2014</td> </tr> </table> | M M | D D | Y Y Y Y | 03 | 16 | 2014 | | | | | |
| M M | D D | Y Y Y Y | | | | | | | | | | | |
| 03 | 16 | 2014 | | | | | | | | | | | |
| Mailing Address 14 Arrow St | | Transaction ID : CN040514061933Ac | | | | | | | | | | | |
| City Cambridge | State MA | | | | | | | | | | | | |
| Zip Code 02138- | | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10"></td> <td>10.00</td> </tr> </table> | | | | | | | | | | | 10.00 |
| | | | | | | | | | | 10.00 | | | |
| FEC ID number of contributing federal political committee. C C00401224 | | [MEMO ITEM] Conduit: 1 donor; PAC limit not affected | | | | | | | | | | | |
| Name of Employer | Occupation | | | | | | | | | | | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date <table border="1"> <tr> <td colspan="10"></td> <td>2987.01</td> </tr> </table> | | | | | | | | | | | | 2987.01 |
| | | | | | | | | | | 2987.01 | | | |

| | | | | | | | | | | | | | |
|---|--|---|-----|-----|---------|----|----|------|--|---------|--|--|---------|
| Full Name (Last, First, Middle Initial) ActBlue | | Date of Receipt <table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td>23</td> <td>2014</td> </tr> </table> | M M | D D | Y Y Y Y | 03 | 23 | 2014 | | | | | |
| M M | D D | Y Y Y Y | | | | | | | | | | | |
| 03 | 23 | 2014 | | | | | | | | | | | |
| Mailing Address 14 Arrow St | | Transaction ID : CN040514062009Ac | | | | | | | | | | | |
| City Cambridge | State MA | | | | | | | | | | | | |
| Zip Code 02138- | | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10"></td> <td>10.00</td> </tr> </table> | | | | | | | | | | | 10.00 |
| | | | | | | | | | | 10.00 | | | |
| FEC ID number of contributing federal political committee. C C00401224 | | [MEMO ITEM] Conduit: 1 donor; PAC limit not affected | | | | | | | | | | | |
| Name of Employer | Occupation | | | | | | | | | | | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date <table border="1"> <tr> <td colspan="10"></td> <td>2997.01</td> </tr> </table> | | | | | | | | | | | | 2997.01 |
| | | | | | | | | | | 2997.01 | | | |

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|--|---|--|--|--|--|--|--|--|--|------|--|------|
| SUBTOTAL of Receipts This Page (optional) | <table border="1"> <tr> <td colspan="10"></td> <td>0.00</td> </tr> </table> | | | | | | | | | | | 0.00 |
| | | | | | | | | | | 0.00 | | |
| TOTAL This Period (last page this line number only) | <table border="1"> <tr> <td colspan="10"></td> <td></td> </tr> </table> | | | | | | | | | | | |
| | | | | | | | | | | | | |

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

| | | | | |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

A. Full Name (Last, First, Middle Initial)
Nat'l Postal Mail Handlers PAC
Mailing Address 905 16th St NW

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20006- |

FEC ID number of contributing
federal political committee.

C C00345306

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 30 | | 2014 |

Transaction ID : CN040414154811Na

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN ASSOCIATION FOR JUSTICE POLITICAL AC
Mailing Address 777 6th Street, NW
Suite 200

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20001- |

FEC ID number of contributing
federal political committee.

C C00024521

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 28 | | 2014 |

Transaction ID : CN040414154836AM

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Google Net PAC
Mailing Address 1101 New York Ave NW
Second Floor

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20005- |

FEC ID number of contributing
federal political committee.

C C00428623

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03 | | 14 | | 2014 |

Transaction ID : CN031614123632Go

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

3000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

| | | | | | | | | | | | | | |
|---|--|---|---|-------------|----------|-------|---|-------------|----------|--|----|--|------|
| A. Full Name (Last, First, Middle Initial) BNSF RailPAC | | Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>21</td> <td></td> <td>2014</td> </tr> </table> | | M M M | / | D D D | / | Y Y Y Y Y Y | 02 | | 21 | | 2014 |
| M M M | / | D D D | / | Y Y Y Y Y Y | | | | | | | | | |
| 02 | | 21 | | 2014 | | | | | | | | | |
| Mailing Address PO Box 961039 | | Transaction ID : CN040614212042BN | | | | | | | | | | | |
| City Fort Worth | State TX | Zip Code 76161- | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>500.00</td> </tr> </table> | | | | | | 500.00 | | | | |
| | | | | | 500.00 | | | | | | | | |
| FEC ID number of contributing federal political committee. C C00235739 | | | | | | | | | | | | | |
| Name of Employer | Occupation | | | | | | | | | | | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>4500.00</td> </tr> </table> | | | | | | | | 4500.00 | | | | |
| | | | | | 4500.00 | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) BNSF RailPAC | | Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>21</td> <td></td> <td>2014</td> </tr> </table> | | M M M | / | D D D | / | Y Y Y Y Y Y | 02 | | 21 | | 2014 |
| M M M | / | D D D | / | Y Y Y Y Y Y | | | | | | | | | |
| 02 | | 21 | | 2014 | | | | | | | | | |
| Mailing Address PO Box 961039 | | Transaction ID : CN022314105106BN | | | | | | | | | | | |
| City Fort Worth | State TX | Zip Code 76161- | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>1000.00</td> </tr> </table> | | | | | | 1000.00 | | | | |
| | | | | | 1000.00 | | | | | | | | |
| FEC ID number of contributing federal political committee. C C00235739 | | | | | | | | | | | | | |
| Name of Employer | Occupation | | | | | | | | | | | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>5500.00</td> </tr> </table> | | | | | | | | 5500.00 | | | | |
| | | | | | 5500.00 | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) CULAC the PAC of Credit Union Nat'l Assn | | Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>30</td> <td></td> <td>2014</td> </tr> </table> | | M M M | / | D D D | / | Y Y Y Y Y Y | 03 | | 30 | | 2014 |
| M M M | / | D D D | / | Y Y Y Y Y Y | | | | | | | | | |
| 03 | | 30 | | 2014 | | | | | | | | | |
| Mailing Address 601 Pennsylvania Ave NW South Building, Suite 600 | | Transaction ID : CN040414154146CU | | | | | | | | | | | |
| City Washington | State DC | Zip Code 20004- | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>2000.00</td> </tr> </table> | | | | | | 2000.00 | | | | |
| | | | | | 2000.00 | | | | | | | | |
| FEC ID number of contributing federal political committee. C C00007880 | | | | | | | | | | | | | |
| Name of Employer | Occupation | | | | | | | | | | | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>10000.00</td> </tr> </table> | | | | | | | | 10000.00 | | | | |
| | | | | | 10000.00 | | | | | | | | |
| SUBTOTAL of Receipts This Page (optional)..... | | <table border="1"> <tr> <td colspan="5"></td> <td>3500.00</td> </tr> </table> | | | | | | | 3500.00 | | | | |
| | | | | | 3500.00 | | | | | | | | |
| TOTAL This Period (last page this line number only)..... | | <table border="1"> <tr> <td colspan="5"></td> <td></td> </tr> </table> | | | | | | | | | | | |
| | | | | | | | | | | | | | |

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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| | | | | |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) GenenPAC | | Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 03 / 2014 |
| Mailing Address 1 DNA Way | | Transaction ID : CN030614155612Ge |
| City So. San Francisco | State CA | Zip Code 94080- |
| FEC ID number of contributing federal political committee. C C00199257 | | Amount of Each Receipt this Period 2500.00 |
| Name of Employer | Occupation | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 5000.00 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) SEIU C.O.P.E. | | Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 06 / 2014 |
| Mailing Address 1800 Massachusetts Ave NW | | Transaction ID : CN011214140041SE |
| City Washington | State DC | Zip Code 20036- |
| FEC ID number of contributing federal political committee. C C00004036 | | Amount of Each Receipt this Period 2500.00 |
| Name of Employer | Occupation | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 5000.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) AFT COPE Fund | | Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 28 / 2014 |
| Mailing Address 555 New Jersey Ave, N.W. | | Transaction ID : CN040414154920AF |
| City Washington | State DC | Zip Code 20001- |
| FEC ID number of contributing federal political committee. C C00028860 | | Amount of Each Receipt this Period 5000.00 |
| Name of Employer | Occupation | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 10000.00 | |

| | |
|--|-----------------|
| SUBTOTAL of Receipts This Page (optional) | 10000.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | |
|------------------------------------|-------------------------------------|--|------------------------------------|-----------------------------|
| <input type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input checked="" type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 | <input type="checkbox"/> 15 |
|------------------------------------|-------------------------------------|--|------------------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

| | | | | | | | | | | | | | |
|---|-------------|---|---|-------------|----------|-------|---|-------------|----------|--|----|--|------|
| A. Full Name (Last, First, Middle Initial) UFCW Active Ballot Club | | Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>30</td> <td></td> <td>2014</td> </tr> </table> | | M M M | / | D D D | / | Y Y Y Y Y Y | 03 | | 30 | | 2014 |
| M M M | / | D D D | / | Y Y Y Y Y Y | | | | | | | | | |
| 03 | | 30 | | 2014 | | | | | | | | | |
| Mailing Address 1775 K Street NW | | Transaction ID : CN040414153929UF | | | | | | | | | | | |
| City Washington | State DC | Zip Code 20006- | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>2500.00</td> </tr> </table> | | | | | | 2500.00 | | | | |
| | | | | | 2500.00 | | | | | | | | |
| FEC ID number of contributing federal political committee. C C00002766 | | | | | | | | | | | | | |
| Name of Employer Occupation | | | | | | | | | | | | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>7500.00</td> </tr> </table> | | | | | | | 7500.00 | | | | |
| | | | | | 7500.00 | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) IBEW - Voluntary Fund | | Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>03</td> <td></td> <td>2014</td> </tr> </table> | | M M M | / | D D D | / | Y Y Y Y Y Y | 03 | | 03 | | 2014 |
| M M M | / | D D D | / | Y Y Y Y Y Y | | | | | | | | | |
| 03 | | 03 | | 2014 | | | | | | | | | |
| Mailing Address 900 Seventh St, NW | | Transaction ID : CN030614155621IB | | | | | | | | | | | |
| City Washington | State DC | Zip Code 20001- | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>5000.00</td> </tr> </table> | | | | | | 5000.00 | | | | |
| | | | | | 5000.00 | | | | | | | | |
| FEC ID number of contributing federal political committee. C C00027342 | | | | | | | | | | | | | |
| Name of Employer Occupation | | | | | | | | | | | | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>10000.00</td> </tr> </table> | | | | | | | 10000.00 | | | | |
| | | | | | 10000.00 | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) National Air Traffic Controllers PAC | | Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>21</td> <td></td> <td>2014</td> </tr> </table> | | M M M | / | D D D | / | Y Y Y Y Y Y | 02 | | 21 | | 2014 |
| M M M | / | D D D | / | Y Y Y Y Y Y | | | | | | | | | |
| 02 | | 21 | | 2014 | | | | | | | | | |
| Mailing Address 1325 Massachusetts Ave NW | | Transaction ID : CN022314104739Na | | | | | | | | | | | |
| City Washington | State DC | Zip Code 20005- | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>1000.00</td> </tr> </table> | | | | | | 1000.00 | | | | |
| | | | | | 1000.00 | | | | | | | | |
| FEC ID number of contributing federal political committee. C C00238725 | | | | | | | | | | | | | |
| Name of Employer Occupation | | | | | | | | | | | | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>6000.00</td> </tr> </table> | | | | | | | 6000.00 | | | | |
| | | | | | 6000.00 | | | | | | | | |
| SUBTOTAL of Receipts This Page (optional)..... | | <table border="1"> <tr> <td colspan="5"></td> <td>8500.00</td> </tr> </table> | | | | | | | 8500.00 | | | | |
| | | | | | 8500.00 | | | | | | | | |
| TOTAL This Period (last page this line number only)..... | | <table border="1"> <tr> <td colspan="5"></td> <td></td> </tr> </table> | | | | | | | | | | | |
| | | | | | | | | | | | | | |

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

| | | | | |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

| | | | | | | | | | | | | | |
|---|---|---|--|---|---|-----|---|----------|----|--|----|--|------|
| A. Full Name (Last, First, Middle Initial) JStreet PAC | | Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>04</td> <td></td> <td>2014</td> </tr> </table> | | M M | / | D D | / | Y Y Y Y | 01 | | 04 | | 2014 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | | |
| 01 | | 04 | | 2014 | | | | | | | | | |
| Mailing Address PO Box 33106 | | Transaction ID : CN012714084637JS | | | | | | | | | | | |
| City Washington | State DC | Zip Code 20033- | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>1000.00</td> </tr> </table> | | | | | 1000.00 | | | | | |
| | | | | 1000.00 | | | | | | | | | |
| FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> <td>C00441949</td> </tr> </table> | | C | C00441949 | [MEMO ITEM] Conduit: 1 donor; PAC limit not affected | | | | | | | | | |
| C | C00441949 | | | | | | | | | | | | |
| Name of Employer | Occupation | | | | | | | | | | | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> <td>2360.00</td> </tr> </table> | | | | | | | 2360.00 | | | | | |
| | | | | 2360.00 | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) JStreet PAC | | Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>21</td> <td></td> <td>2014</td> </tr> </table> | | M M | / | D D | / | Y Y Y Y | 02 | | 21 | | 2014 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | | |
| 02 | | 21 | | 2014 | | | | | | | | | |
| Mailing Address PO Box 33106 | | Transaction ID : CN022314105458JS | | | | | | | | | | | |
| City Washington | State DC | Zip Code 20033- | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>150.00</td> </tr> </table> | | | | | 150.00 | | | | | |
| | | | | 150.00 | | | | | | | | | |
| FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> <td>C00441949</td> </tr> </table> | | C | C00441949 | [MEMO ITEM] Conduit: 1 donor; PAC limit not affected | | | | | | | | | |
| C | C00441949 | | | | | | | | | | | | |
| Name of Employer | Occupation | | | | | | | | | | | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> <td>2510.00</td> </tr> </table> | | | | | | | 2510.00 | | | | | |
| | | | | 2510.00 | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) | | Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> | | M M | / | D D | / | Y Y Y Y | | | | | |
| M M | / | D D | / | Y Y Y Y | | | | | | | | | |
| | | | | | | | | | | | | | |
| Mailing Address | | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>0.00</td> </tr> </table> | | | | | | 0.00 | | | | | |
| | | | | 0.00 | | | | | | | | | |
| City | State | Zip Code | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>64500.00</td> </tr> </table> | | | | | 64500.00 | | | | | |
| | | | | 64500.00 | | | | | | | | | |
| FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> <td></td> </tr> </table> | | C | | [MEMO ITEM] Conduit: 1 donor; PAC limit not affected | | | | | | | | | |
| C | | | | | | | | | | | | | |
| Name of Employer | Occupation | | | | | | | | | | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> <td></td> </tr> </table> | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| SUBTOTAL of Receipts This Page (optional)..... | | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>0.00</td> </tr> </table> | | | | | | 0.00 | | | | | |
| | | | | 0.00 | | | | | | | | | |
| TOTAL This Period (last page this line number only)..... | | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>64500.00</td> </tr> </table> | | | | | | 64500.00 | | | | | |
| | | | | 64500.00 | | | | | | | | | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 61 OF 87

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

Full Name (Last, First, Middle Initial)

A. Lauren E. Swanson

Mailing Address 1611 SE Belmont St #206

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Portland | OR | 97214- |

Purpose of Disbursement
Reimbursement - see detail

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01 | / | 17 | / | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 341.73 |
|--------|

Transaction ID : EX011714155054La

B. Lauren E. Swanson

Mailing Address 1611 SE Belmont St #206

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Portland | OR | 97214- |

Purpose of Disbursement
Reimbursement - See detail

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | / | 18 | / | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 341.81 |
|--------|

Transaction ID : EX021814114343La

c. Lauren E. Swanson

Mailing Address 1611 SE Belmont St #206

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Portland | OR | 97214- |

Purpose of Disbursement
Wages

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | / | 28 | / | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 2673.41 |
|---------|

Transaction ID : EX031614132515La

[MEMO ITEM]
ADP detail**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

| |
|--------|
| 683.54 |
|--------|

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 62 OF 87

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

Full Name (Last, First, Middle Initial)

A. Lauren E. Swanson

Mailing Address 1611 SE Belmont St #206

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Portland | OR | 97214- |

Purpose of Disbursement
Reimbursement - See detail

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 20 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 383.46 |
|--------|

Transaction ID : EX032014104931La

B. Lauren E. Swanson

Mailing Address 1611 SE Belmont St #206

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Portland | OR | 97214- |

Purpose of Disbursement
Reimbursement - See detail

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 20 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 114.04 |
|--------|

Transaction ID : EX032014132925La

C. Lauren E. Swanson

Mailing Address 1611 SE Belmont St #206

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Portland | OR | 97214- |

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 28 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 2673.41 |
|---------|

Transaction ID : EX032814085923La

[MEMO ITEM]
ADP detail**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

497.50

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 63 OF 87

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

Full Name (Last, First, Middle Initial)

A. 5 Verizon Center

Mailing Address 5 Verizon Center

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20003- |

Purpose of Disbursement
catering/space

007

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 03 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 904.00 |
|--------|

Transaction ID : EX0316141320065

[MEMO ITEM]

AMEX detail

B. Advanced Data Processing (ADP)

Mailing Address 504 Clinton Center Dr

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Clinton | MS | 39056- |

Purpose of Disbursement
payroll production

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01 | | 03 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 91.50 |
|-------|

Transaction ID : EX011214144524Ad

c. Advanced Data Processing (ADP)

Mailing Address 504 Clinton Center Dr

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Clinton | MS | 39056- |

Purpose of Disbursement
W-2 production

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01 | | 21 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 61.50 |
|-------|

Transaction ID : EX021614093602Ad

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

153.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 64 OF 87

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

Full Name (Last, First, Middle Initial)

A. Advanced Data Processing (ADP)

Mailing Address 504 Clinton Center Dr

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Clinton | MS | 39056- |

Purpose of Disbursement
TriMet taxes

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 | | 3 | 0 | | 2 | 0 | 1 | 4 |

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 6 | 1 | . | 0 | 2 |
|---|---|---|---|---|

Transaction ID : EX021614092440Ad

B. Advanced Data Processing (ADP)

Mailing Address 504 Clinton Center Dr

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Clinton | MS | 39056- |

Purpose of Disbursement
Wages

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 | | 3 | 1 | | 2 | 0 | 1 | 4 |

Amount of Each Disbursement this Period

| | | | | | | |
|---|---|---|---|---|---|---|
| 2 | 6 | 7 | 3 | . | 4 | 1 |
|---|---|---|---|---|---|---|

Transaction ID : EX021614093403Ad

C. Advanced Data Processing (ADP)

Mailing Address 504 Clinton Center Dr

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Clinton | MS | 39056- |

Purpose of Disbursement
Taxes

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 | | 3 | 1 | | 2 | 0 | 1 | 4 |

Amount of Each Disbursement this Period

| | | | | | | |
|---|---|---|---|---|---|---|
| 1 | 5 | 3 | 0 | . | 3 | 5 |
|---|---|---|---|---|---|---|

Transaction ID : EX021614093426Ad

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4264.78

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 65 OF 87

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

Full Name (Last, First, Middle Initial)

A. Advanced Data Processing (ADP)

Mailing Address 504 Clinton Center Dr

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Clinton | MS | 39056- |

Purpose of Disbursement
Payroll production

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 07 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 91.50 |
|-------|

Transaction ID : EX021614093234Ad

B. Advanced Data Processing (ADP)

Mailing Address 504 Clinton Center Dr

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Clinton | MS | 39056- |

Purpose of Disbursement
Wages

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 28 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 1526.75 |
|---------|

Transaction ID : EX031614132453Ad

see detail

C. Advanced Data Processing (ADP)

Mailing Address 504 Clinton Center Dr

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Clinton | MS | 39056- |

Purpose of Disbursement
Wages

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 28 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 2673.41 |
|---------|

Transaction ID : EX031614132438Ad

See detail

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4291.66

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 66 OF 87

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

Full Name (Last, First, Middle Initial)

A. Advanced Data Processing (ADP)

Mailing Address 504 Clinton Center Dr

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Clinton | MS | 39056- |

Purpose of Disbursement
Payroll production

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 07 | | 2014 |

Amount of Each Disbursement this Period

91.50

Transaction ID : EX031614132119Ad

B. Advanced Data Processing (ADP)

Mailing Address 504 Clinton Center Dr

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Clinton | MS | 39056- |

Purpose of Disbursement
Wages

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 28 | | 2014 |

Amount of Each Disbursement this Period

1507.55

Transaction ID : EX032814085754Ad

C. Advanced Data Processing (ADP)

Mailing Address 504 Clinton Center Dr

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Clinton | MS | 39056- |

Purpose of Disbursement
Wages

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 28 | | 2014 |

Amount of Each Disbursement this Period

2673.41

Transaction ID : EX032814085827Ad

SUBTOTAL of Disbursements This Page (optional).....

4272.46

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 67 OF 87

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

Full Name (Last, First, Middle Initial)

A. Alaska Airlines

Mailing Address 19300 International Blvd

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Seattle | WA | 98188- |

Purpose of Disbursement
airline ticket

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | / | 28 | / | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 148.00 |
|--------|

Transaction ID : EX03161413232AI

B. American Express

Mailing Address PO Box 650448

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Dallas | TX | 75265- |

Purpose of Disbursement
Credit card payment - See memo detail

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01 | / | 07 | / | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 355.80 |
|--------|

Transaction ID : EX011214144627Am

C. American Express

Mailing Address PO Box 650448

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Dallas | TX | 75265- |

Purpose of Disbursement
Credit card payment - See memo detail

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | / | 07 | / | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 160.00 |
|--------|

Transaction ID : EX021614092210Am

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

663.80

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 68 OF 87

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 650448

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Dallas | TX | 75265- |

Purpose of Disbursement
Credit card payment - See memo detail

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 07 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 2885.08 |
|---------|

Transaction ID : EX031614131258Am

B. Angerholzer Broz Consulting LLCMailing Address 499 S Capitol St SW
Suite 422

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20003- |

Purpose of Disbursement
Fundraising consulting

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01 | | 12 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 4643.16 |
|---------|

Transaction ID : EX011214145641An

c. Angerholzer Broz Consulting LLCMailing Address 499 S Capitol St SW
Suite 422

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20003- |

Purpose of Disbursement
Fundraising consulting #201313BAP

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01 | | 27 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 4054.34 |
|---------|

Transaction ID : EX012714091303An

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

11582.58

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 69 OF 87

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

Full Name (Last, First, Middle Initial)

A. Angerholzer Broz Consulting LLCMailing Address 499 S Capitol St SW
Suite 422

City Washington State DC Zip Code 20003-

Purpose of Disbursement
Fundraising consulting #201353BAP

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 02 | 25 | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 4039.64 |
|---------|

Transaction ID : EX022514120022An

B. Authorize dot Net

Mailing Address 10800 NE 8th Street Suite 600

City Bellevue State WA Zip Code 98004-

Purpose of Disbursement
credit card processing

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 01 | 03 | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 27.95 |
|-------|

Transaction ID : EX011214144511Au

c. Authorize dot Net

Mailing Address 10800 NE 8th Street Suite 600

City Bellevue State WA Zip Code 98004-

Purpose of Disbursement
credit card processing

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 02 | 04 | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 27.95 |
|-------|

Transaction ID : EX021614093347Au

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4095.54

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

Full Name (Last, First, Middle Initial)

A. Authorize dot Net

Mailing Address 10800 NE 8th Street Suite 600

City State Zip Code
 Bellevue WA 98004-

Purpose of Disbursement
 credit card processing

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
 03 / 04 / 2014

Amount of Each Disbursement this Period

27.95

Transaction ID : EX031614132209Au

B. C&E Systems

Mailing Address PO Box 42306

City State Zip Code
 Portland OR 97242-

Purpose of Disbursement
 Compliance reporting, postage, merchant

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
 01 / 27 / 2014

Amount of Each Disbursement this Period

1560.95

Transaction ID : EX012714090804C&

c. C&E Systems

Mailing Address PO Box 42306

City State Zip Code
 Portland OR 97242-

Purpose of Disbursement
 Compliance reporting, postage, merchant

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
 02 / 18 / 2014

Amount of Each Disbursement this Period

1152.34

Transaction ID : EX021814114645C&

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2741.24

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

Full Name (Last, First, Middle Initial)

A. Cricket

Mailing Address 621 SW Broadway

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Portland | OR | 97201- |

Purpose of Disbursement
Telephone

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | / | 11 | / | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 82.00 |
|-------|

Transaction ID : EX021614093209Cr

B. Democratic Party of Oregon

Mailing Address 232 NE 9th Ave

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Portland | OR | 97232- |

Purpose of Disbursement
Rent

001

Candidate Name

Democratic Party of OregonCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01 | / | 27 | / | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 250.00 |
|--------|

Transaction ID : EX012714090935De

C. Democratic Party of Oregon

Mailing Address 232 NE 9th Ave

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Portland | OR | 97232- |

Purpose of Disbursement
Rent

001

Candidate Name

Democratic Party of OregonCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | / | 09 | / | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 250.00 |
|--------|

Transaction ID : EX021014122718De

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

582.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

Full Name (Last, First, Middle Initial)

A. First Bank Merchant Services

Mailing Address PO Box 407066

| | | |
|-----------------|-------|----------|
| City | State | Zip Code |
| Fort Lauderdale | FL | 33340- |

Purpose of Disbursement
Merchant fee

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01 | | 03 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Transaction ID : EX011214144454Fi

B. First Bank Merchant Services

Mailing Address PO Box 407066

| | | |
|-----------------|-------|----------|
| City | State | Zip Code |
| Fort Lauderdale | FL | 33340- |

Purpose of Disbursement
Merchant fee

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 04 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Transaction ID : EX021614093326Fi

C. First Bank Merchant Services

Mailing Address PO Box 407066

| | | |
|-----------------|-------|----------|
| City | State | Zip Code |
| Fort Lauderdale | FL | 33340- |

Purpose of Disbursement
Merchant fee

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 04 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Transaction ID : EX031614132257Fi

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

75.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 73 OF 87

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

Full Name (Last, First, Middle Initial)

A. Fred Meyer

Mailing Address 11425 SW Beaverton Hillsdale

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 07 | | 2014 |

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Beaverton | OR | 97007- |

Purpose of Disbursement
campaign refreshments

007

Candidate Name

Category/
Type

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Amount of Each Disbursement this Period

| |
|--------|
| 462.50 |
|--------|

Transaction ID : EX031614133327Fr

[MEMO ITEM]

American Express Detail

B. Friends of Tobias Read

Mailing Address PO Box 42307

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01 | | 27 | | 2014 |

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Portland | OR | 97242- |

Purpose of Disbursement
office rent - Jan/Feb

001

Candidate Name

Category/
Type

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01 | | 27 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 462.50 |
|--------|

Transaction ID : EX012714091020Fr

c. Golden Valley Brewery

Mailing Address 1520 NW Bethany

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01 | | 23 | | 2014 |

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Beaverton | OR | 97006- |

Purpose of Disbursement
Event catering and location

007

Candidate Name

Category/
Type

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Amount of Each Disbursement this Period

| |
|--------|
| 800.00 |
|--------|

Transaction ID : EX031614131813Go

[MEMO ITEM]

AMEX detail

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

462.50

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 74 OF 87

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

Full Name (Last, First, Middle Initial)

A. Google Apps

Mailing Address 1600 Amphitheatre Pkwy

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01 | | 07 | | 2014 |

| | | |
|---------------|-------|----------|
| City | State | Zip Code |
| Mountain View | CA | 94043- |

Amount of Each Disbursement this Period

| |
|-------|
| 35.00 |
|-------|

Purpose of Disbursement
Google Apps

004

Transaction ID : EX011214144607Go

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. Google Apps

Mailing Address 1600 Amphitheatre Pkwy

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 07 | | 2014 |

| | | |
|---------------|-------|----------|
| City | State | Zip Code |
| Mountain View | CA | 94043- |

Amount of Each Disbursement this Period

| |
|-------|
| 35.00 |
|-------|

Purpose of Disbursement
Google Apps

004

Transaction ID : EX021614093309Go

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. Google Apps

Mailing Address 1600 Amphitheatre Pkwy

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 07 | | 2014 |

| | | |
|---------------|-------|----------|
| City | State | Zip Code |
| Mountain View | CA | 94043- |

Amount of Each Disbursement this Period

| |
|-------|
| 35.00 |
|-------|

Purpose of Disbursement
Google Apps

001

Transaction ID : EX031614132155Go

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

105.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 75 OF 87

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

Full Name (Last, First, Middle Initial)

A. Hyatt

Mailing Address 100 Heron Blvd

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 11 | | 2014 |

City State Zip Code
Cambridge MD 21613-

Amount of Each Disbursement this Period

| |
|---------|
| 1150.00 |
|---------|

Purpose of Disbursement

002

Transaction ID : EX040514080450Hy

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)
[MEMO ITEM]

American Express Detail

State:

District:

Full Name (Last, First, Middle Initial)

B. IRS/Oregon Revenue Dept/TriMet

Mailing Address Salem

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 28 | | 2014 |

City State Zip Code
Salem OR 97301-

Amount of Each Disbursement this Period

| |
|---------|
| 1526.75 |
|---------|

Purpose of Disbursement
Payroll taxes

001

Transaction ID : EX031614132540IR

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)
[MEMO ITEM]

ADP detail

State:

District:

Full Name (Last, First, Middle Initial)

c. IRS/Oregon Revenue Dept/TriMet

Mailing Address Salem

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 28 | | 2014 |

City State Zip Code
Salem OR 97301-

Amount of Each Disbursement this Period

| |
|---------|
| 1507.55 |
|---------|

Purpose of Disbursement
Payroll taxes

001

Transaction ID : EX032814085854IR

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)
[MEMO ITEM]

ADP detail

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 76 OF 87

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

Full Name (Last, First, Middle Initial)

A. Kaiser Permanente

Mailing Address 500 NE Multnomah #100

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Portland | OR | 97232- |

Purpose of Disbursement
Health care

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01 | | 15 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 264.00 |
|--------|

Transaction ID : EX040614164635Ka

[MEMO ITEM]

Reimbursement detail

B. Kaiser Permanente

Full Name (Last, First, Middle Initial)

Mailing Address 500 NE Multnomah #100

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Portland | OR | 97232- |

Purpose of Disbursement
Healthcare

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 03 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 264.00 |
|--------|

Transaction ID : EX021814114439Ka

[MEMO ITEM]

Reimbursement detail (Swanson)

C. Kaiser Permanente

Full Name (Last, First, Middle Initial)

Mailing Address 500 NE Multnomah #100

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Portland | OR | 97232- |

Purpose of Disbursement
Healthcare

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 07 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 305.65 |
|--------|

Transaction ID : EX032014104959Ka

[MEMO ITEM]

Reimbursement detail - Swanson

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

| |
|------|
| 0.00 |
|------|

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 77 OF 87

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

Full Name (Last, First, Middle Initial)

A. Made in Oregon

Mailing Address 9589 SW Washington

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 20 | | 2014 |

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Tigard | OR | 97223- |

Amount of Each Disbursement this Period

| |
|--------|
| 161.49 |
|--------|

Purpose of Disbursement
Gift

001

Transaction ID : EX031614132641Ma

Candidate Name

Category/
Type

Office Sought:

| | |
|--------------------------|-----------|
| <input type="checkbox"/> | House |
| <input type="checkbox"/> | Senate |
| <input type="checkbox"/> | President |

Disbursement For: 2014

| | |
|---|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) | |

State:

District:

Full Name (Last, First, Middle Initial)

B. Morel Ink

Mailing Address PO Box 4625

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01 | | 12 | | 2014 |

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Portland | OR | 97208- |

Amount of Each Disbursement this Period

| |
|---------|
| 3380.71 |
|---------|

Purpose of Disbursement
Printing - 13-5871, 5515, 5774, 5772

006

Transaction ID : EX011214145052Mo

Candidate Name

Category/
Type

Office Sought:

| | |
|--------------------------|-----------|
| <input type="checkbox"/> | House |
| <input type="checkbox"/> | Senate |
| <input type="checkbox"/> | President |

Disbursement For: 2014

| | |
|---|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) | |

State:

District:

Full Name (Last, First, Middle Initial)

C. NGP/VAN Software

Mailing Address 1101 15th St #500 NW

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 25 | | 2014 |

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20005- |

Amount of Each Disbursement this Period

| |
|---------|
| 1650.00 |
|---------|

Purpose of Disbursement
Software subscription

003

Transaction ID : EX022514120114NG

Candidate Name

Category/
Type

Office Sought:

| | |
|--------------------------|-----------|
| <input type="checkbox"/> | House |
| <input type="checkbox"/> | Senate |
| <input type="checkbox"/> | President |

Disbursement For: 2014

| | |
|---|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) | |

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5192.20

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 78 OF 87

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

Full Name (Last, First, Middle Initial)

A. PhRMAMailing Address Attn: Wendy Gregg
950 F Street NW, Suite 300

City Washington State DC Zip Code 20004-

Purpose of Disbursement
Event tickets

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 09 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 2054.00 |
|---------|

Transaction ID : EX021014122603Ph

B. Secretary of State, Elections Division

Mailing Address 255 State Street

City Salem State OR Zip Code 97310-

Purpose of Disbursement
filing fee

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 21 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Transaction ID : EX022114113248Se

c. Secretary of State, Elections Division

Mailing Address 255 State Street

City Salem State OR Zip Code 97310-

Purpose of Disbursement
Voters Pamphlet Statement

004

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 14 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 2500.00 |
|---------|

Transaction ID : EX031614131214Se

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4654.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 79 OF 87

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

Full Name (Last, First, Middle Initial)

A. Southwest Airlines

Mailing Address PO Box 36647-1CR

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Dallas | TX | 75235- |

Purpose of Disbursement
Airline Trave

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 28 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 262.00 |
|--------|

Transaction ID : EX031614132309So

B. Sprint Wireless

Mailing Address 609 SW Broadway

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Portland | OR | 97205- |

Purpose of Disbursement
Cellular phone

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01 | | 05 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 77.73 |
|-------|

Transaction ID : EX040614164720Sp

[MEMO ITEM]

Reimbursement detail

c. Sprint Wireless

Mailing Address 609 SW Broadway

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Portland | OR | 97205- |

Purpose of Disbursement
Cellular phone

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 05 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 77.81 |
|-------|

Transaction ID : EX021814114539Sp

[MEMO ITEM]

Rembursement detail - Swanson

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

262.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

Full Name (Last, First, Middle Initial)

A. US Postal Service

Mailing Address 4550 SW Betts Ave

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Beaverton | OR | 97005- |

Purpose of Disbursement
PO Box renewal

001

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01 | | 27 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 88.00 |
|-------|

Transaction ID : EX012714090625US

B. US Postal Service

Mailing Address 4550 SW Betts Ave

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Beaverton | OR | 97005- |

Purpose of Disbursement
Postage

001

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 06 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 152.60 |
|--------|

Transaction ID : EX040514080550US

[MEMO ITEM]

American Express Detail

C. Verizon Wireless

Mailing Address PO Box 660108

| | | |
|--------|-------|------------|
| City | State | Zip Code |
| Dallas | TX | 75266-0108 |

Purpose of Disbursement
Cellular phone

001

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 12 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 356.80 |
|--------|

Transaction ID : EX021614093139Ve

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

444.80

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 82 OF 87

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address PO Box 660108

| | | |
|--------|-------|------------|
| City | State | Zip Code |
| Dallas | TX | 75266-0108 |

Purpose of Disbursement
Cellular phone

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 24 | | 2014 |

Amount of Each Disbursement this Period

| |
|--------|
| 195.88 |
|--------|

Transaction ID : EX032814085952Ve

B. Winning Mark

Mailing Address 1220 SW Morrison St #910

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Portland | OR | 97205- |

Purpose of Disbursement
Campaign monitoring 314788,314837,314869

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01 | | 12 | | 2014 |

Amount of Each Disbursement this Period

| |
|---------|
| 1194.00 |
|---------|

Transaction ID : EX011214145444Wi

C. wufoo.com

Mailing Address 285 Hamilton Ave

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Palo Alto | CA | 94301- |

Purpose of Disbursement
subscription

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01 | | 17 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 14.95 |
|-------|

Transaction ID : EX021614093639wu

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1404.83

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 83 OF 87

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

Full Name (Last, First, Middle Initial)

A. wufoo.com

Mailing Address 285 Hamilton Ave

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Palo Alto | CA | 94301- |

Purpose of Disbursement
subscription

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 17 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 14.95 |
|-------|

Transaction ID : EX031614132738wu

B. wufoo.com

Mailing Address 285 Hamilton Ave

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Palo Alto | CA | 94301- |

Purpose of Disbursement
subscription

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 17 | | 2014 |

Amount of Each Disbursement this Period

| |
|-------|
| 14.95 |
|-------|

Transaction ID : EX032814090011wu

C.

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
| | | |

Purpose of Disbursement

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| | | | | |

Amount of Each Disbursement this Period

| |
|--|
| |
|--|

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

| |
|-------|
| 29.90 |
|-------|

| |
|----------|
| 46458.33 |
|----------|

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 84 OF 87

| | | | |
|------------------------------|--|------------------------------|------------------------------|
| <input type="checkbox"/> 17 | <input checked="" type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Bonamici for Congress

Full Name (Last, First, Middle Initial)

A. Democratic Congressional Campaign Committee

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01 | | 27 | | 2014 |

Mailing Address 430 S. Capitol St SE
2nd Floor

City Washington State DC Zip Code 20003-

Purpose of Disbursement
Transfer to DCCC

008

Candidate Name

Democratic Congressional Campaign CommitteeCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

| |
|----------|
| 28750.00 |
|----------|

Transaction ID : EX012714091217De

B. Democratic Congressional Campaign Committee

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 31 | | 2014 |

Mailing Address 430 S. Capitol St SE
2nd Floor

City Washington State DC Zip Code 20003-

Purpose of Disbursement
Transfer to DCCC

008

Candidate Name

Democratic Congressional Campaign CommitteeCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

| |
|----------|
| 10000.00 |
|----------|

Transaction ID : EX033114153506De

C.

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| | | | | |

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

| |
|--|
| |
|--|

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

28750.00

28750.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 86 OF 87

| | | | |
|------------------------------|------------------------------|------------------------------|--|
| <input type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input checked="" type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Bonamici for Congress

| | | | | |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial) A. Beaverton Arts Foundation | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014 | |
| Mailing Address PO Box 2 | | | | |
| City Beaverton | State OR | Zip Code 97075- | Amount of Each Disbursement this Period 125.00 | |
| Purpose of Disbursement Donation | | 012 Category/ Type | Transaction ID : EX031614132620Be | |
| Candidate Name | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| State: | District: | | | |
| Full Name (Last, First, Middle Initial) B. Oregon Business Council | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013 | |
| Mailing Address 1100 SW 6th Ave | | | | |
| City Portland | State OR | Zip Code 97204- | Amount of Each Disbursement this Period 200.00 | |
| Purpose of Disbursement Event tickets | | 012 Category/ Type | Transaction ID : EX011214145317Or [MEMO ITEM] AmEx detail | |
| Candidate Name | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| State: | District: | | | |
| Full Name (Last, First, Middle Initial) c. Oregon Women's Campaign School | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014 | |
| Mailing Address PO Box 13753 | | | | |
| City Portland | State OR | Zip Code 97213- | Amount of Each Disbursement this Period 1000.00 | |
| Purpose of Disbursement donation | | 012 Category/ Type | Transaction ID : EX030314130726Or | |
| Candidate Name | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| State: | District: | | | |
| SUBTOTAL of Disbursements This Page (optional)..... | | | 1125.00 | |
| TOTAL This Period (last page this line number only)..... | | | 1125.00 | |

SCHEDULE C (FEC Form 3)
LOANS

PAGE 87 OF 87

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☐ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Bonamici for Congress

Transaction ID : DBDbt10031109544607

LOAN SOURCE Full Name (Last, First, Middle Initial)

Suzanne Bonamici

[PERSONAL FUNDS]

Election: 2011

☐ Primary☐ General☒ Other (specify) ▼Mailing Address
PO Box 1632

City

State

ZIP Code

Beaverton

OR

97075-

Original Amount of Loan

200000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

200000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
09 / 30 / 2011

Date Due

M M / D D / Y Y Y Y

As available

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

200000.00

TOTALS This Period (last page in this line only)..... ►

200000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.